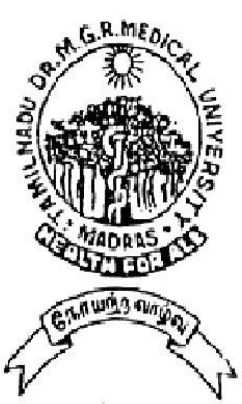
**A STUDY ON OUTCOME OF 1000 CASES OF DIABETIC FOOT**

Dissertation submitted for

# M.S., DEGREE (General Surgery)

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## THE TAMILNADU DR. M.G.R. MEDICAL UNIVERSITY

## CHENNAI - TAMILNADU

# CERTIFICATE

This is to certify that this dissertation entitled "**A STUDY ON OUTCOME OF 1000 CASES OF DIABETIC FOOT "** is bonafide record work done by Dr**. J. STANLY GLADSON DANIEL** under my direct supervision and guidance, submitted to the Tamil Nadu Dr. M.G.R. Medical University in partial fulfillment of University regulation for MS, Branch I – General Surgery.


**DR. M. Gopinath M.S.,**

Professor and Head

Department of General Surgery,

Madurai Medical College and

Government Rajaji Hospital,

Madurai

**DR. S. Rajasekaran M.S.,**

Additional Professor,

Department of General Surgery

Madurai Medical College and

Government Rajaji Hospital,

Madurai

# DECLARATION

I **Dr.J. STANLY GLADSON DANIEL** solemnly declare that this dissertation titled "**A STUDY ON OUTCOME OF 1000 CASES OF DIABETIC FOOT"** has been done by me. I also declare that this bonafide work or a part of this work was not submitted by me or any other for any award, degree, diploma to any other University board either in India or abroad.

This is submitted to The Tamilnadu Dr. M. G. R. Medical University, Chennai in partial fulfillment of the rules and regulation for the award of Master of Surgery degree Branch –I (General Surgery) to be held in March 2010.

**Place :** Madurai **Dr. J. STANLY GLADSON DANIEL**

**Date :**

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# CONTENTS

# INTRODUCTION

Diabetes continues to be one of the most common underlying factors associated with lower extremity amputation in post industrialized and developing countries. Amputations are perhaps the most feared but ignored complication of Diabetes by the innocent general public.

For most patients, amputation is a pivotal event that alters their quality and duration of life and strain on heart, when amputated patients uses crutches or artificial limb. Amputations have been associated with an increased risk of reamputation of the same extremity, amputation of the contralateral leg, an elevated mortality in the first 3 – 5 years after amputation and placement in nursing homes or extended care facilities.

There are several well accepted predisposing factors that place patients with diabetes with a high risk for a lower extremity amputation. The most common components in the causal pathway to limb loss Include peripheral neuropathy, peripheral vascular disease, ulceration and infection. Ulceration that is unattended is the most common single precursor to amputation and has been identified as a component in 85% of lower extremity amputations.

As diabetic foot problems quickly reach the point of no return, it is

vital to diagnose them early and provide rapid and intensive treatment.

Furthermore, it is important to achieve early recognition of the at-risk foot so

as to institute prompt preventive measures. The multidisciplinary foot clinic can

reduce the numbers of amputations and enable us to take a new approach to the

diabetic foot by early diagnosis and treatment.

Systematically recording the characteristics of ulcerations is critical to

planning treatment strategies, monitoring treatment effectiveness, predicting

clinical outcomes and improving communication among health care providers.

Most classification systems reported in the medical literature have

primarily focused on the depth of the ulceration and have neglected or

inconsistently included infection, peripheral neuropathy, peripheral vascular

disease and previous amputation. These factors have been widely discussed in

the literature. The aim of this study was to study the prevalence of the risk

factors like, peripheral neuropathy and peripheral vascular disease among

thousand cases admitted to hospital and their influence in deciding the final

outcome of the patient. Also the prevalence of amputation at different levels is

studied.

# AIM OF THE STUDY

1. To study the outcome of 1000 cases of diabetic foot with respect

to primary healing and amputation

2. To study the prevalence of diabetic foot in patients admitted to

GRH with regard to age, sex distribution

3. To study the prevalence of peripheral neuropathy and peripheral

vascular disease

4. To study the amputation among these patients with regard to its

incidence and level of amputation

# MATERIALS AND METHODS

This study was conducted in Government Rajaji Hospital, Madurai from

July 2007 to August 2009 and included 1000 cases admitted in surgical ward.

Patients treated as OP are excluded from the study. As part of the protocol

patients treated in the ward have a standardized evaluation to assess peripheral

neuropathy and peripheral vascular disease.

The diagnosis of diabetes was verified for all patients using the criteria set

forth by the World Health Organization, which include treatment with insulin, two

random glucose measurements >200 mg/dl or a fasting glucose >126 mg/dl.

Sensory neuropathy was evaluated with a 10-g Semmes – Weinstein

monofilament wire and a modified neuropathy disability score.

The diagnosis of infection was made using clinical criteria. Wounds with

frank purulence and/ or two or more of the following local signs were classified as

“infected”. These signs include warmth, erythema, lymphangitis ,

lymphadenopathy, edema, pain and loss of function.

A working diagnosis of lower extremity ischemia was made by a

combination of clinical and noninvasive vascular studies. Clinical signs were based

on the absence of one or more foot pulses of the involved foot. Noninvasive

criteria included an ankle-brachial index (ABI) of <0.80. Clinical signs and/or the

presence of abnormal noninvasive values make a diagnosis of lower extremity

vascular insufficiency.

The nature of treatment fall in

1) Debridement of wound
2) Amputation

To assess the level of amputation by stage and grade of wound we stratified all lower extremity amputations in the following levels

1) Toe
2) Tran metatarsal
3) Transtibial
4) Transfemoral

Chi-square analysis and odds ratio was used to demonstrate the potential

association between peripheral neuropathy, peripheral vascular disease and amputation.

# PATHOPHYSIOLOGY OF DIABETIC FOOT

Diabetes Mellitus is associated with more than half of all non-traumatic

lower limb amputations. The major pathophysiology factors are ischemia,

neuropathy and wound infection. They operate concurrently and sequentially,

enhancing the risk for amputation fifteen fold in diabetic subjects compared to

non diabetics. Since the diabetic foot is the sequel of interaction of multitude of

factors, intervention must be directed towards correction of all causative factors.

## CAUSATIVE FACTORS OF DIABETIC FOOT

### VASCULAR DISEASE:

Diabetes mellitus is associated with structural changes in large as well as

small blood vessels, resulting in ischemia. The atherosclerotic process in a

a diabetic occurs more frequently and at an early age and advances more rapidly

compared to non diabetics and is devoid of the normal sex difference seen in the

latter. The frequently associated risk factors for diabetic vascular disease include

smoking, hypertension, hyperlipidemia and insulin resistance with compensatory

hyperinsulinemia, besides the severity of duration of diabetes, age and genetic

factors. Smoking enhances the risk of peripheral vascular disease more than

hundred times compared to non- diabetes non smokers. However cessation of

smoking has been associated with a decrease in the progression of

atherosclerosis.



Hypertension is twice as common in diabetics as compared to non

diabetics; roughly one third to one half of diabetics have hypertension. Systolic

hypertension has been linked with disease of proximal blood vessels. A significant

association of hypertension with above knee and bilateral amputations have been

observed.

Numerous studies allude to the strong association of hyperlipidemia with

peripheral vascular disease. The ratio of LDL- cholesterol to HDL cholesterol

probably assumes greater significance in the diabetic population because the

protective effect of a high HDL cholesterol is nullified by a concomitant increase

in LDL cholesterol fraction.

**NEUROPATHY:**

Loss of pain and thermal sensation renders the foot vulnerable to trauma

due to the mechanical, chemical and thermal factors leading to ulcerations. Loss

of proprioception and muscle atrophy due to motor neuropathy result in foot

deformities. The resultant alteration in the configuration with new pressure

points leads to callous formation and subsequent ulceration. Autonomic

neuropathy with absent sweating and dry, fissured skin offering portals of entry

for infection are important contributory factors for foot ulcer. The association of

autonomic neuropathy with foot ulcer is almost 100%.



**BIOMECHANICAL ASPECTS:**

Combination of neuropathy and trauma result in tissue breakdown. The

atrophy of the intrinsic muscle of the foot, predominantly plantar flexors of the

toes alters the flexor/ extensor balance at the meta tarso phalangeal joints and

causes clawing of the toes and prominence of the metatarsal heads. Alterations

of foot shape results in increased plantar pressure. A majority of wounds on

insensitive foot are not caused by accidental injury or ischemia but from

continuous pressure. Often moderate stress as occurring during locomotion on

the same part of the insensitive foot leads to callus formation and ulcer. The

presence of callus may exacerbate the problem both acting as a foreign body and

by increasing the plantar pressure.

Limited joint mobility is yet another factor contributing to elevated plantar

pressure. Glycosylation of collagen results in thickening and cross linking of

collagen bundles. This result in restriction of joint movements particularly sub

talar joint and the mechanism of walking. Limited joint mobility also occurs in the

hands.

**HAEMORHEOLOGY**

Haematocrit, plasma viscosity, platelet activity and red blood cell

aggregation constitute macro vessel haemorheology, while micro vessel

haemorheology involves red blood cells and white blood cells deformability.



All these factors are unfavorably altered in diabetic subjects, accentuating the

ischemic process due to structural changes of large and small blood vessels.

**INFECTION:**

Frequent and severe infection in diabetic subjects is facilitated by vascular

insufficiency, a normal individual responds to infection by increasing the blood

supply to the site, as blood supply has to be increased 12 – 15 times to maintain

the viability of the skin. If this increased demand cannot be met, the skin breaks

down and tissue necrosis results. Necrosed tissue is a good nidus for organisms to

thrive.

Most of the diabetic foot infections are caused by multiple organisms

including anaerobes. Bacteroids are the commonest group of pathogens isolated

in culture. Soft tissue gas formation has been encountered in diabetic subjects

and the capacity for gas formation is exhibited not only by the coliform group

( aerobic and anaerobic gram negative rods ) but also by streptococci and

staphylococci. Osteomyelitis is observed in some of the diabetic foot lesions.

## PERIPHERAL VASCULAR DISEASE

The peripheral vascular disease occurring in diabetic subjects is

multisegmental with a predilection for vessels below the level of the popliteal

artery; often the pathology is bilateral. These features are in marked contrast to



those encountered in the non – diabetic population. Not uncommonly, the

collateral vessels especially peripheral are involved, with the result that gangrene

occurs in patchy areas of the foot and toes, in contrast to the extensive gangrene

occurring in the non diabetic subjects where major vessels are involved.

Patients may present with intermittent claudication, nocturnal pain and

rest pain, the latter two being relieved by dependency. Nocturnal pain is the form

of ischemic neuritis that proceeds to rest pain. During sleep the circulation

predominantly caters to the splanchanic area, resulting in diminished perfusion of

the lower extremities; consequently ischemic neuritis becomes intense and

disturbs sleep. The patient attempts to gain relief by standing, dangling the feet

or occasionally walking a few steps; the resultant increase in cardiac output

improves tissue perfusion, affording relief from pain. Failure of intervention at the

stages of nocturnal and rest pain ultimately results in tissue necrosis and

gangrene, necessitating amputation.

On examination of an ischemic limb, the feet are cold with absent pulses,

blanching on elevation with delayed venous filling. The skin appears shiny with

loss of hair and thickened nails. On the other hand, the neuropathic foot will be

warm and veins will be prominent on the dorsum of the foot due to arterio

venous shunts resulting from autonomic neuropathy.

# FEATURES OF THE ISCHEMIC FOOT:

- Painful lesions
- Dry black gangrene either confined to a toe or the heel, or extensive and infected
- Cold feet that become pale on elevation and cyanosed on depression
- Thin atrophic feet
- Thickened nails
- Sparse hair
- Peripheral pulses weak or absent
- Slow venous filling
- Vascular investigations, ischemia
- Normal or slightly  reduced reflexes and sensation

# FEATURES OF THE NEUROPATHIC FOOT:

- Disproportion between lesions and absence of pain
- Keratosis
- Cracks
- Ulcers and plantar ulcers
- Deformity of foot and toes
- Amyotrophy
- Loss of sense of touch
- Loss of pain and vibration sensation
- Loss of tendon reflexes
- Warm dry feet
- Venous congestion

- Edema

- Pulses present

- No evidence of ischemia on investigations



The vascular laboratory provides essential additional information

which serves to initiate measures in the management of peripheral vascular

disease. The ankle and toe pressures, ankle – brachial systolic pressure ratio

( ischemic index ), the wave pattern of flow, are some of the indices

routinely used in the assessment. An ankle pressure of less than 70 mmHg

is associated with poor healing of ulcers while a pressure of more than 100

mm Hg is associated with good prognosis. Similarly a toe pressure of less

than 200 mmHg has been found to be associated with increased failure of

distal amputation while more than 40 mmHg is associated with good

prognosis. An ischemic index of 0.45 with pulsatile flow indicated healing in

93% of subjects while an index below 0.45 necessitated evaluation for

vascular reconstruction.

However, the outcome of non invasive vascular studies should not be

allowed to influence clinical judgment on site selection for amputation,

because falsely high segmental systolic pressures could be obtained with a

rigid calcified lower extremity artery. In fact the importance of pulsatile

wave forms on arterial impedance Plethysmography is more reliable

parameters of prevailing vascularity.

Sophisticated techniques are now available for vascular assessment

in predicting healing of amputation and ulcers. Skin blood flow calculated

from Xenon – 133 clearance, a micro invasive procedure and

transcutaneous oxymetry are some of those techniques. Cutaneous blood

flow of more than 2.6 ml /100 g / min has been associated with good

healing. However all the above indices may fail to predict healing accurately

because the state of the local wound dominates the outcome. For example,

a severe infection can dampen the beneficial effects of the marginal blood

flow or occasionally even a good blood flow.

## NEUROPATHY:

The classical peripheral neuropathy of diabetes mellitus is often

bilateral; and symmetrical. The sensory component predominates, with

patients complaining of pain and paresthesias while on objective

examination there is blunting of pain and temperature sensation – “the

painful painless leg". The sensory disturbances generally appear early in

distal portions of the lower extremities, eventually progressing to a stock

and glove distribution. Involvement of large sensory and motor fibres

impairs light touch and proprioception and causes weakness of intrinsic

muscles of the feet with alteration of pressure points.

Neuropathy can be assessed by clinical examination and conduction

studies. Autonomic neuropathy with its important contribution towards the

propagation and maintenance of foot ulcer can be assessed at the bedside

by a battery of tests. Since the peripheral nerve is the common pathway for

neural flow, severe peripheral neuropathy is manifested by autonomic

disturbances in the periphery.

## REPETITIVE MODERATE STRESS:

In a normal as well as in insensitive feet, walking briskly is accompanied by progressive hyperemia over points of maximum stress.

Thermography helps to outline the temperature contrast of progressive inflammation from such a process. In subjects with insensitive feet thermographic pattern shows hyperemia at sites of old scar, there by inferring that these subjects have been stressing that particular area more than optimally, due to absence of pain and as a result of motor neuropathy.

Similarly, in- shoe foot prints help to detect the points of persistent and maximum stress on the feet which probably could be alleviated by proper footwear.

## INFECTION:

Many diabetic foot ulcers tend to be neglected because the lesions

are asymptomatic. Osteomyelitis should be suspected when non-healing

ulcer overlies a bony prominence. It should however be distinguished from

diabetic osteopathy and neuroarthropathy, occurring as a result of

denervation. The radiological hallmark of diabetic osteopathy is the

charesterically pointed metatarsal called “the peppermint stick sign”. The

distribution of diabetic osteopathy is multifocal and bilateral; besides, the

condition associated with normal leucocyte count and ESR. However, the

distinction between osteomyelitis and osteopathy is often made on clinical

grounds.

Infection is the second common associated factor in Diabetic foot

ulcer. The longer ulcer is present, more likely the surrounding tissue will

acquire increased bacterial load. Increased abnormal bacterial bioburden

significantly delay wound healing because they compete for Oxygen and

nutrients. When local signs of infection are present increased discharge

precedes frank purulence and local malodor. The surrounding tissue may

become edematous, erythematous and can be painful in an otherwise

painless foot. The average number of organisms is as high as 4.8 species per

ulcer from qualitative bacterial skin biopsy.



When in doubt about presence or absence of infection, the use of an

infrared thermometry device may help diagnostically. The thermometer

should be used on 4 quadrants surrounding ulcer and compared to

opposite foot in same location. Difference of 4 to 5 degree F or more

suggest infection.

Surface bacterial culture of wound are often misleading and may not

represent the organism within underlying granulation tissue of the wound.

While the “gold standard” is a punch or tissue biopsy, these approaches are

invasive and specialized microbiologic processing is not easily available.

## Severity of Infection:

Severity of infection helps to assess potential necessity and timing of surgery. The key factors in classifying a foot infection are assessing the depth of the wound ( by both visually inspecting the tissues involved and estimating depth in millimeters), the presence of ischemia ( absent pulses or diminished blood pressure in the foot), and the presence of infection.

Because of the anatomy of the foot deep space infections often have deceptively few signs in the plantar or dorsal aspects. Thus it is critical that a patient with even mild swelling of the foot but with systemic toxicity be evaluated for an occult deep space infection.

**Simple clinical classification of severity of diabetic foot infections:**

| S. N | CLASS | Superficial Ulcer Or Cellulitis | Deep soft or Bone Infection | Tissue Necrosis or Gangrene | Systemic Toxicity |
|---|---|---|---|---|---|
| 1. | Mild | **+** | -- | **+/--** | **--** |
| 2. | Moderate | **+** | **+/ --** | **+/--** | -- |
| 3. | Severe | + | **+/--** | **+/--** | **--** |

## CHARCOTS FOOT:

Charcot foot or neuroarthropathy is defined as a relatively

painless, progressive, degenerative arthropathy of single or multiple joints

caused by underlying neuropathy. Charcot neuropathy is characterized by

simultaneous presence of bone and joint destruction, fragmentation and

remodeling. Diabetes is the commonest cause of charcot foot and most

patients have a dense neuropathy but good circulation. Walking on an

insensitive foot leads to excessive and repetitive stress to bone causing

micro fracture and finally bone and joint destruction. Diabetic neuropathy and presence of auto sympathectomy lead to peripheral vasodilatation.

( warm foot ). A significant arteriovenous shunting takes place leading to

abnormal bone cell activity (osteoclastic) and eventual resorption and

weakening of bone. Ultimately the foot shape is deformed and runs into a

bag of bone.

Bone and joint damage in the meta-tarsal region is the commonest

site of involvement and leads to the two classical deformity.

1)Rocker bottom deformity in which there is displacement and

subluxation of the tarsus downward.

2)Medial convexity, which results from displacement of the talo-

navicular joint or from tarso-metatarsal dislocation.

Both are often associated with a bony prominence which is very

prone to ulceration. Healing is notoriously difficult. If these deformities are

not diagnosed early and accommodated in properly fitting footwear,

ulceration at vulnerable pressure points often develops.

It is not uncommon to mistake acute charcot foot for cellulitis and

osteomyelitis. If the affected foot is elevated, the erythema will recede



whereas that of cellulitis will persist. Should not be mistaken for cellulitis

and operated upon.

Plain X- ray of the foot will show demineralization, bone destruction

and periosteal reaction. Marked osseous resorption of bone results in

“ pencil pointing” and “sucked candy” deformities of the metatarsal heads

and shafts. In the largest joints of the foot there will be destruction of

bone and new bone formation.

The treatment is conservative, mainly immobilization either by total

contact cast or the diabetic air cast walker with inflatable air cells. There is

some evidence on that biphosphanate drugs given intravenously in the

acute phase may shorten the duration of the acute phase presumably by

reducing the bone turnover directly and also slowing down the process

which weakens the bone and renders it susceptible for foot fracture and

fragmentation.

It is a dictum that a “ warm swollen foot in a diabetic with neuropathy

without local and systemic signs of infection , charcot foot must be

considered until proven otherwise”.

# EVALUATION OF DIABETIC FOOT

## Assessment of Neuropathy

Neuropathy is the most common complication of diabetes affecting 50% of all diabetic patients. Although it may present with tingling and feeling of numbness, it is asymptomatic in majority of patients and neuropathy will be only detected by clinical examination. An important indication neuropathy will be a patient who fails to complain of pain, even when significant foot lesions are present. Painless ulceration is definite evidence of a peripheral neuropathy.

The presentation of peripheral neuropathy is related to dysfunction of sensory, motor and autonomic nerves. Simple inspection will usually reveal signs of motor and autonomic neuropathy but sensory neuropathy must be detected by screening or by a simple sensory examination.

## Motor Neuropathy:

The classical sign of a motor neuropathy is a high medial longitudinal arch,

leading to prominent metatarsal heads and pressure points over the plantar

forefoot. In severe cases, pressure points also develop over the apices and dorsal

interphalangeal joints of associated claw toes. However claw toe is a common

deformity and may not always be related to a motor neuropathy. It may be

caused by wearing unsuitable shoes or trauma or may be congenital.



Congenital assessment of motor power in the foot or leg is not usually

necessary, but it is advisable to test dorsiflexion of the foot to detect a foot drop

secondary to a common peroneal nerve palsy. This is usually unilateral and will

affect the patient's gait.

## Autonomic Neuropathy:

The classical signs of autonomic neuropathy are:

-Dry skin with fissuring

-Distended veins over the dorsum of the foot and ankle

## Sensory Neuropathy

Sensory neuropathy can be simply detected by,

-Monofilaments

-Neurothesiometer

If these are not available then a simple clinical examination detecting sensation

to light touch using a cotton wisp and vibration using a 128 Hz tuning fork will

suffice, comparing site with a distal site to confirm a symmetrical stocking like

distribution of the neuropathy.

## Monofilament

The Semmes- Weinstein monofilament is a valuable, easy to use tool. The

monofilament is a long nylon wire, the tip of which gives a force of 10 grams is

pressed perpendicularly against the skin to the point of buckling for at lest one

second. The points of testing are plantar aspects of $1^{st}$, $3^{rd}$ and $5^{th}$ digits, the

plantar aspects of $1^{st}$ , $3^{rd}$, $5^{th}$ metatarsal heads, the plantar midfoot medially and

dorsally and the plantar heel(10 sites totally). Neuropathy is said to exist when 4

out of these 10 sites show absence of sensation when the wire is pressed against

the skin.

An alternate method of testing neuropathy is use of biothesiometer

(vibration perception threshold meter ). This had a hand held probe whose tip

vibrates at 100 Hz. The voltage supplied to the probe can be adjusted from 0 to 50

V. The probe is placed against the skin and voltage increased till he perceives the

vibration. Mean of three readings is used to determine the VPT for each foot.

Normal reading should be less than or equal to 25 V.

## Assessment of peripheral vasculature

This includes palpation of the pulses ( dorsalis pedis, posterior tibial,

Popliteal and femoral). Absence of distal pulses in a diabetic foot is a sure sign of

significant arterial disease. However presence of palpable pulse does not

absolutely exclude vascular disease.

Ankle brachial index is a simple method of assessing vascular insufficiency.

It is obtained by dividing the ankle systolic pressure by the brachial systolic

pressure. Normal values are 1.0 +/_ 0.1. However the ABI can be deceptive

because calcification of vessels in diabetes can lead to falsely elevated ABI.

If facilities are available one can make a more detailed assessment of

peripheral circulation by measuring toe pressure (using a photoplethysmograph).

Normal systolic toe pressure is >4 KPA. Transcutaneous oxygen tension (N> 40

mmHg ) is another noninvasive test of circulation in the periphery. Reduced

oxygen tension is associated with significant vascular disease and so,

transcutaneous oxygen tension has been used to assess ulcer healing potential

and also determine amputation levels.

Once vascular disease has been diagnosed, it may be assessed in detail

using duplex scanning of the arterial system. If vascular construction is planned an

angiogram is considered. However angiogram, despite being the gold standard,

has limitations since we may not be able to use it in patients with diabetic

nephropathy.



## Assessment of Osteopathy

Plain X-rays are not always reliable in diagnosis of early osteomyelitis,

though diagnosis of advanced osteomyelitis is relatively straight forward. It is

difficult to differentiate between osteomyelitis and diabetic osteoarthropathy. It

is reasonable to presume that osteomyelitis exists if one is able to probe to bone

during clinical evaluation of an ulcer.

## Deformity

Deformity often leads to bony prominences, which are associated with

high mechanical pressures on the overlying skin. This results in ulceration,

particularly in the absence of protective pain sensation and when shoes are

unsuitable. Common deformities includes,

- Claw toes
- Pes cavus
- Hallux rigidus

- Hallux valgus

- Hammer toe

- Mallet toe

- Fibro fatty padding deletion

  Charcot foot

- Deformities related to previous trauma and surgery

- Nail deformities

## Callus

This is thickened area of epidermis which develops at sites of pressure,

shear and friction. It should not be allowed to become excessive as callus is a

common fore runner of ulceration in presence of neuropathy.

## Swelling

Swelling of the tissues of the foot is a major factor predisposing to

ulceration and organ exacerbates a tight fit inside poorly fitting shoes. It also

impedes healing of established ulcers.

## Skin Breakdown

An active search should be made for breaks in the skin over the entire

surface of the foot and ankle, not forgetting the areas between the toes and at

the back of the heel. Toes should be gently held apart for inspection. If jerked

apart, this can split the skin. The classical sign of tissue breakdown is the foot

ulcer. However fissures and bullae/ blisters  also represent breakdown of the skin.



Some lesions will be obvious; others will make their presence known by

their complications such as;

- Discharge or exudates
- color changes under callus or nail plate
- pain or discomfort

- swelling

- warmth

- erythema

## Infection

When skin breakdown develops, it may act as a portal of entry for infection.

A close inspection for signs of infection should be made. These include purulent

discharge from the lesion and erythema swelling and warmth of the toe or foot.

## Necrosis

Finally lesions of skin breakdown may progress to underlying necrosis. This

can be identified by the presence of black or brown devitalized tissue.

# INTEGRATED EXAMINATION

In practice the examination of the foot should be divided into four main

parts: inspection, palpation, neurological examination and vascular assessment.

1) ## Inspection

The foot should be fully inspected including dorsum, sole, back of the heel

and interdigital areas with a full assessment.

- Color ( as an indicator of ischemia)
- Deformity
- Swelling
- Callus
- Skin breakdown
- Infection
- Necrosis

## 2) Palpation

Pulses should be palpated and skin temperature compared between both

feet with the back of the examining hand. The measurement of the skin



temperature is particularly helpful in the management of the charcot foot when a

digital skin thermometer is useful.

## Neurological assessment

Peripheral neuropathy should be detected either by using the monofilament or Neurothesiometer or by performing a simple sensory examination.

## Vascular status:

All the peripheral pulses must be examined and compared with the normal

limb. With regard to lower limb femoral, popliteal, dorsalis pedis and posterior

tibial arterial pulse must be examined

# CLASSIFICATION OF DIABETIC FOOT

## Wagner Classification

Grade 0 – No ulcer but high risk foot ( deformity or cellulitis)

1 – superficial diabetic ulcer ( partial/ full)

2 – ulcer expands to ligaments, tendons, joints, capsule or deep fascia

without abscess and / or osteomyelitis

3 – deep ulcer with abscess/ osteomyelitis / joint sepsis

4 – gangrene localized to portion of fore foot ( toe/ heel)

5 – extensive gangrenous involvement of entire foot

The other classification that can also be used is **SAN – ANTONIO UNIVERSITY OF**

**TEXAS WOUND CLASSIFICATION.**

# MANAGEMENT OF DIABETIC FOOT

## (a) WAGNER grade 0 foot:

This includes patients with apparently normal foot, varying degrees of

neuropathy or joint deformities. They may not have any ulcer or infection but are

potentially " at risk". They need regular assessment at least annually. Neuropathy

must be looked for during each assessment. The best way to prevent neuropathy

or delay it is to keep blood sugar under control.

Assessment of vascular status is also mandatory. Absent foot pulses even in the absence of claudication or rest pain indicates significant vascular disease and such patients may be suitable candidates for vascular reconstruction or angioplasty. Remember that a diabetic may not manifest claudication symptoms if he had neuropathy.

These " at risk" patients may have elevated pressures over some points on the sole. They need appropriate footwear ( extra depth shoes with cushioned insoles). Charcot's feet may need custom shoes.

Regular trimming of callus is needed. These patients also need advice

regarding care of feet/ pedicure.

## (b) WAGNER grade 1 foot:

These are patients who have presented with either cellulitis or a superficial Ulcer. Ulcer occurs either with repetitive low pressure or sustained high pressure

(>6 kg/cm) at that point on the sole during walking.

Relief of pressure is the mainstay of ulcer treatment. An ulcer will not heal if the patient walks on it. A variety of ways are available to "off load" the ulcer.

These include complete bed rest use of total contact caste walkers, braces etc.

As in the case of grade 0 feet, appropriate management of vascular disease is needed. Infection needs antibiotics and debridement as appropriate.

Education, foot care, footwear and regular careful follow up are the principle factors in management of grade 1 feet.

## (c) WAGNER grade 2 and 3 feet:

These are patients with deep ulcers with or without complications like abscesses and osteomyelitis. These patients need aggressive surgical debridement. Osteomyelitis must be appropriately managed by debridement/ excision of infected bone.

Once the ulcer has healed, the patient needs long term care to devise appropriate foot wear and also education regarding foot care, in order to avoid recurrence.

## (d) WAGNER grade 4 and 5 feet:

These are patients who have either localized or extensive gangrene. They need minor or major amputation respectively. Almost always there is vascular occlusive disease.

These patients therefore need appropriate surgical amputation followed by vascular reconstructions.

After care involves special footwear for the ipsilateral and contralateral foot. (These patients tend to over use the other foot and develop ulcers of the opposite foot). In case of major amputees, prosthetic devices need to be fitted in order to mobilize the patient. Mortality rate of diabetes after a major amputation is nearly 50% at one year.

# FOOTWEAR RECOMMENDATIONS IN DIABETICS

The recommendations are based on the following grading:

| RISK CLASS | FEATURES |
| --- | --- |
| 0 (low risk) | Has normal protective sensations |
| 1 ( medium risk) | Has neuropathy but no deformity or<br>Previous ulceration or amputation |
| 2 (high risk) | Neuropathy + deformity present<br>But no previous ulceration or amputation |
| 3 (very high risk) | Neuropathy + deformity + history of<br>previous ulcer or amputation |

## Risk class 0:

Essentially normal patients. They need to be advised to wear shoes with

thick sole (to absorb vertical compressive forces) with soft uppers ( to mould foot

shape and avoid shoe bite) with ample toe box ( to be able to wiggle toes).

## Risk class 1:

They are potential candidates for ulcerations, since they have no protective

sensation. These patients need advice on foot care (do not walk barefoot, avoid

bathroom surgery, avoid extremes of temperature while washing feet ), in

addition they need foot wear that satisfies all criteria for class “0” but also has a

pressure dissipating accommodative insole (to avoid local high pressures).

## Risk class 2:

These are neuropathic patients with foot deformity (such as bunions, claw

toe, hammer toe). They need a footwear with extra soft accommodative uppers

that mould to the foot's shape while allowing enough space for toe movement.

The sole may need to have recessed heel (to reduce impact at "heel strike" phase

of gait) along with angulation of the sole just behind the metatarsal heads (so that

a rolling motion is obtained during walking – like a "rocker – bottom"). A total

contact insert is beneficial.

## Risk class 3:

These are patients who have already ulcerated once and are likely to do so

repeatedly. They need footwear recommendations as for a grade 2 well fitting



shoes with a rocker bottom sole and moulded insoles.

In case of patients with active ulceration, various options are available to off-load the foot. These are:

1. Total contact cast

2. Air cast or patellar tendon weight bearing brace

3. Temporary shoes (talus shoes, which has no sole in the front so that

   patient walks only on heel.

4. Customized foot wear (applicable to patients with charcot's foot who

have disrupted bony architecture of foot).

## ANTIBIOTICS:

Antibiotic therapy should be instituted with a broad spectrum antibiotic

immediately after obtaining the cultures. Antibiotic should be effective for gram

positive and gram negative organisms.

Criteria for hospitalizing a patient for treatment of infection parenteral

antibiotics includes sepsis, temperature elevation, leucocytosis, peripheral arterial

disease and uncontrolled diabetes.

# ADJUNCTIVE THERAPY FOR WOUND HEALING

Investigations have shown that autologous platelet derived growth factor

Formula (PDGF) can be an important adjunct to heal wounds that have shown

resistance to comprehensive approaches. Steed has shown that recombinant

PDGF significantly achieved complete healing in diabetic foot wounds when

compared to standards of care alone. Recombinant PDGF in a gel caplermin is

applied once a day to the wound and covered with moist gauze dressing. A

dressing change without PDGF is applied approximately 12 hours later. PDGF

should not be used when there is extensive necrosis, active infection , and/ or

ischemia.

The use of living tissue equivalent is another new technique for accelerating

wound healing in diabetic foot ulcers. Dermograft is derived from cultured

human dermis. It is derived from foreskin tissue cultures. Dermagraft consists of

neonatal dermal fibroblasts cultured in vitro onto a bioabsorbable mesh. This

produces living metabolically active tissue containing normal growth factors and

cytokines.

Hyperbaric oxygen (HBO) is gaining favor as treatment for diabetic foot

wounds. Orianni et al. found that amputation rates in 62 diabetics who were

treated for foot ulcers with HBO was only 4% compared to 49% of the control

group who were unable or unwilling to undergo the therapy with HBO. Systematic

hyperbaric oxygen greatly increases tissue oxygen levels. Oxygen tension values

remain elevated for several hours after exposure. It must be kept in mind that

HBO is a supplemental treatment to standard wound care. It is ineffective in

patients with severe peripheral vascular disease. Hyperbaric oxygen delivered by

a hyperbaric boot is of no value. It must be delivered by putting the patient into

single or multiple person chambers.

Electrical stimulation is another form of therapy for wound healing. William

gilbert proposed the use of electrical stimulation for wound healing as far back as

1600. This was followed by a number of contributions over the years. Wood and

colleagues found the pulse lower intensity direct current represented a useful

approach for the treatment of chronic ulcers.

Recently, Baker et al found that electrical stimulation given daily with short

pulsed asymmetric biphasic waveform was effective for enhancement of healing



rates for patients with diabetes and open wounds. Using this technique they

found a significant increase in the healing rate by nearly 60% in patients treated

with electrical stimulation compared to controls. Patients treated with

asymmetric biphasic square wave pulse did not show any increased wound

healing. Lundeberg et al, also reported improved wound healing of diabetic ulcers

using electrical nerve stimulation.

Ultrasound has also been suggested as a treatment for healing diabetic

wounds. Ultrasound refers to high frequency, mechanical vibrations that are

produced when electrical energy is converted to sound waves. Ultrasound gets its

name because the sound is beyond the range of human hearing, ultrasound may

be helpful because of its stimulatory effects in fibroblasts and macrophages and

on angiogenesis. Ultrasound can cause dire consequences when applied in an

improper manner, and this may result in tissue destruction.

Again it must be kept in mind that wound healing using electrical

stimulation or ultrasound is still experimental and further control studies will be necessary to prove conclusively their efficacy in the treatment of diabetic foot wounds.

# Debridement

Aggressive, ongoing surgical debridement converts a chronic nonhealing

ulcer into an acute healing wound. Adequate debridement of necrotic tissue

(eschar, slough) is needed before adequate assessment and staging can be

accomplished. There are several methods for wound debridement, including

sharp surgical, mechanical, enzymatic and autolytic. Truly it is a continuum, from

flushing away debris with low pressure irrigation to wide excision.

Following factors must be considered

1) Selective versus nonselective method
2) Presence or absence of pain

3) Arterial Insufficiency ( Dry Gangrene)

4) Drugs that may increase bleeding (e.g. Coumadin, aspirin, NSAID's)

5) Resources and setting

**Sharp surgical debridement:**

The most selective and efficacious method of debridement is sharp surgical

debridement. Debridement of the hyperkeratotic rim and ulcer base to bleeding is

the optimal method of debridement for the patient with an ulcer.



**Autolytic Debridement:**

Autolytic debridement with moist interactive dressings (hydrogel, alginates,

transparent film, hydrocolloids) is selective and liquefies slough and eschar as well

as promotes granulation tissue formation.

**Mechanical Debridement:**

Mechanical debridement may be accomplished with wet – to – dry guaze

dressings, irrigation, pulsatile lavage or whirlpool.

**Enzymatic Debridement:**

Historically enzymes (collagenase, papain, urokinase, etc.,) have been used

as debriding agents for eschar and slough. They have a selective action, but are

slow, costly and labor intensive. It is replaced by Sharp Surgical debridement.

## Biologicals: Human Skin Equivalents and Skin Grafts:

The nonhealing wound may have a deficiency of growth factor or

nonresponsive cells. Platelet derived growth factor can help to stimulate some

nonhealing wounds. Recent advances in tissue culture techniques have made it

possible to culture cells from human foreskin donors. Human skin equivalent like

Apligraft can be used. Split skin graft is an ideal procedure to cover raw area in

the absence of infection.

## Lower limb amputations:

The risk factors for amputation identified are long duration of diabetes,

neuropathy and peripheral vascular disease:  high levels of $HbA_{1c}$ or fasting

plasma glucose; and a history of ulcers, amputations, retinopathy and patient

education. The two protective factors identified were provision of outpatient diabetes education and use of aspirin.

The loss of peripheral sensation decreases patient's awareness of foot pressure, discomfort and even pain and increases the risk of ulceration and amputation.

Peripheral vascular risk factors included low $TcPo_2$ low AAI and absent or diminished dorsalis pedis and posterior tibial pulses. Major symptoms of lower limb arterial disease are intermittent claudication, absent peripheral pulses and rest pain.

High blood pressure was an independent predictor of amputation. Poor

glycemic control has been associated with an increased risk of amputation. Other

risk factors are cigarette smoking and lipoprotein abnormalities.



# OBSERVATIONS AND RESULTS

In our study, Diabetic foot ulcer was more common in Males. Out of 1000

Patients, 614 were males which forms 61.4% and 386 were females which forms

38.6%.

| SEX | PATIENTS | |
|---|---|---|
| | No. | % |
| Male | 614 | 61.4 |
| Female | 386 | 38.6 |

The most common affected age group was between 50 to 60 years in both

males and females.

Mean age of males is 59.5 years

Mean age of females is 51.3 years

AGE DISTRIBUTION IN MALES:

| AGE | PATIENTS | |
|---|---|---|
| | No. | % |
| < 40 | 18 | 2.9 |
| 41 -- 50 | 71 | 11.6 |
| 51 – 60 | 249 | 40.6 |
| 61 – 70 | 240 | 39.1 |
| > 70 | 36 | 5.8 |
| Total | 614 | 100 |
| Mean age | 59.5 years | |

51 – 60 were the most common age group affected among males with 249

patients affected comprising 40.6 %.

61 – 70 were the next most common affected age group with 240 patients

comprising 39.1 %.

Less than 40 years age group was the least affected comprising 18 patients

forming 2.9%



AGE DISTRIBUTION AMONG FEMALES:

| AGE | PATIENTS | |
|---|---|---|
| | No. | % |
| < 40 | 13 | 3.3 |
| 41 -- 50 | 161 | 41.6 |
| 51 – 60 | 166 | 43.1 |
| 62 – 70 | 37 | 9.6 |
| > 70 | 9 | 2.4 |
| Total | 386 | 100 |
| Mean age | 51.3 years | |

The most common age group affected among females was 51 – 60 years

with 166 patients comprising 43.1 %.

The next most affected age group was 41 – 50 years with 161 patients

forming 41.6%.

More than 70 years age group was least affected with only 9 patients

involved forming 2.4 %



## PREVALENCE OF PERIPHERAL NEUROPATHY:

Peripheral neuropathy was found to be prevalent among 272 patients

forming 27.2 %. Among them 140 patients were male and 132 patients were

female.

| SEX | PATIENTS | |
|---|---|---|
| | No. | % |
| Male | 140 | 51.4 |
| Female | 132 | 48.6 |

The most common affected age group was 61 – 70 in both sexes.

| **AGE** | **PATIENTS** | |
|---|---|---|
| | No. | % |
| 41 -- 50 | 32 | 11.8 |
| 51 – 60 | 89 | 32.7 |
| 61 – 70 | 137 | 50.3 |
| > 70 | 14 | 5.2 |
| Total | 272 | 100 |



## PREVALENCE OF PERIPHERAL VASCULAR DISEASE:

Peripheral vascular disease was found to be prevalent among 188 patients

forming 18.8 %. Among them 114 patients were male and 74 patients were

female.

| SEX | PATIENTS | |
|---|---|---|
| | No. | % |
| Male | 114 | 60.6 |
| Female | 74 | 39.4 |

The most common affected age group was 51 – 60 in both sexes.

| **AGE** | **PATIENTS** | |
|---|---|---|
| | No. | % |
| 41 -- 50 | 37 | 19.6 |
| 51 – 60 | 89 | 47.3 |
| 61 – 70 | 54 | 28.7 |

| | | |
|---|---|---|
| > 70 | 8 | 4.4 |
| Total | 188 | 100 |



## PREVALENCE OF AMPUTATION:

154 patients underwent some form of amputation forming 15.4 %. Among

them 92 patients were male and 62 patients were female.

| SEX | PATIENTS | |
|---|---|---|
| | No. | % |
| Male | 92 | 59.7 |
| Female | 62 | 40.3 |

The most common affected age group was 51 – 60 in males and 61-70 in females.

AGE DISTRIBUTION AMONG MALES:

| | **PATIENTS** |
|---|---|

| AGE | No. | % |
|---|---|---|
| 41 -- 50 | 15 | 16.3 |
| 51 – 60 | 48 | 52.2 |
| 61 – 70 | 27 | 29.3 |
| > 70 | 2 | 2.2 |
| Total | 92 | 100 |



AGE DISTRIBUTION AMONG FEMALES:

| AGE | PATIENTS | |
|---|---|---|
| | No. | % |
| 41 -- 50 | 15 | 24.1 |
| 51 – 60 | 19 | 30.6 |
| 61 – 70 | 27 | 43.5 |
| > 70 | 1 | 1.8 |
| Total | 62 | 100 |

| | | |
|---|---|---|
| | | |

The different levels of amputations that the patients underwent were:

1) Toe

2) Tran metatarsal

3) Below knee or Transtibial

4) Above knee or Transfemoral



DISTRIBUTION OF LEVELS OF AMPUTATION:

| LEVEL OF AMPUTATION | PATIENTS | |
|---|---|---|
| | No. | % |
| Toe | 63 | 41.2 |
| Trans metatarsal | 16 | 10.5 |
| Below knee or Transtibial | 44 | 28.2 |
| Above knee or Transfemoral | 31 | 20.1 |
| Total | 154 | 100 |

## DEBRIDEMENT AND SKIN GRAFT:

Sharp surgical debridement was done in 846 patients and limb was

salvaged without any form of amputation. Among these patients 19 received split

skin graft to cover the raw area. The average graft take was more than 95 %.



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**Toe amputation  - 41.2 %**

**Trans metatarsal amputation – 10.5 %**

**Trans tibial amputation – 28.2 %**

**Trans femoral 20.1 %**

## RELATIONSHIP BETWEEN NEUROPATHY AND TREATMENT

| NEUROPATHY | TREATMENT | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | Debridement | | Toe Amputation | | Trans Metatarsal Amputation | | BK and AK Amputation | |
| | No. | % | No. | % | No. | % | No. | % |
| Present (272) | 155 | 57 | 34 | 12.5 | 15 | 5.4 | 68 | 25 |
| Absent (728) | 702 | 96.4 | 26 | 3.6 | 0 | - | 0 | - |
| P Value | 0.015 ( Significant) | | | | | | | |

30 % of patients with Neuropathy received high level amputation. All

patients without neuropathy did not receive mid foot or higher level amputation.

Thus presence of Neuropathy increases severity of treatment. This relationship is

statistically significant as P value is less than 0.05.

## RELATIONSHIP BETWEEN ISCHEMIA AND TREATMENT

| PERIPHERAL VASCULAR DISEASE | TREATMENT | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | Debridement | | Toe Amputation | | Trans Metatarsal Amputation | | BK and AK Amputation | |
| | No. | % | No. | % | No. | % | No. | % |
| Present (188) | 110 | 59.2 | 18 | 9.5 | 9 | 4.9 | 51 | 26.4 |
| Absent (812) | 777 | 95.7 | 33 | 4.0 | 2 | 0.3 | 0 | - |
| P Value | 0.017 ( Significant) | | | | | | | |

31.3 % of patients with Ischemia received high level amputation. All

patients without Ischemia did not receive higher level amputation.

Thus presence of Ischemia increases severity of treatment. This relationship is

statistically significant as P value is less than 0.05.

# DISCUSSION

## Age and Sex:

In our study, Diabetic foot ulcer was more common in males (61.4 %). The

most common affected age group was between 50 to 60 years in both males and

females. Mean age of males is 59.5 years and females is 51.3 years.

## Neuropathy:

The prevalence of peripheral neuropathy among the diabetic foot patients

was 27.2 %. The most common affected age group in both sexes was 61 – 70

years. 30 % of patients who presented with neuropathy were amputated at Trans

metatarsal level or proximally and it was statistically significant.

## Ischemia:

The prevalence of peripheral neuropathy among the diabetic foot patients

was 18.8 %. The most common affected age group was 51 to 60 in both sexes.

31.3 % of patients who presented with ischemia were amputated at Trans

metatarsal level or proximally and it was statistically significant.

## Amputation:

The prevalence of amputation among diabetic foot patients in our study

was 15.4 %. The most common affected age group was 51 to 60 in males and

61 – 70 in females. Males more commonly underwent amputation than their

female counterparts in the ratio of 1.4 : 1. Distal  amputation in the form of toe

or trans metatarsal was done in 51.7 % patients. 48.3 % patients underwent

proximal amputations in the form of Trans tibial or Trans femoral amputation.

# CONCLUSION

- In our study, Diabetic foot ulcer was more common in males (61.4 %). The

most common affected age group was between 51 to 60 years in both males and

females. Mean age of males is 59.5 years and females is 51.3 years.

- One- fourth of the patients had Peripheral Neuropathy . 30 % of patients

who presented with neuropathy were amputated at Trans metatarsal level or

proximally and it was statistically significant.

- One- fifth of the patients had Peripheral Vascular Disease with a significant

male preponderance. 31.3 % of patients who presented with ischemia were

amputated at Trans metatarsal level or proximally and it was statistically

significant.

- Amputation rates was 15.4% among diabetic foot patients with a significant

Male preponderance. Distal amputations was more commoner than proximal

amputations.

- Thus Peripheral Neuropathy and Peripheral Vascular Disease play a definite

role in the outcome of the wound and it can be detected by simple examination

and non invasive test.

- Awareness of Diabetic foot complications has to be increased among the

Diabetic patients and their relatives by educating them, since the outcome was

very good in early diagnosis of Diabetic foot.

- All newly diagnosed Diabetics, must be evaluated for Diabetic foot and foot

care has to be given routinely to prevent the Diabetic foot complications at latter date.

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# PROFORMA

Name :

Age:

Sex:

IP No.:

Ward No.:

Date of Admission :

Date of Discharge :

Hypertension : Yes / No

Smoking : Yes / No

Peripheral Neuropathy : Yes / No

Examination of Pulses:

| Pulses | Right | Left |
|---|---|---|
| Femoral | | |
| Popliteal | | |
| Posterior Tibial | | |
| Dorsalis Pedis | | |

Ankle Brachial Pressure Index:

| | Right | Left |
|---|---|---|
| Brachial Pressure | | |
| Ankle Pressure | | |

Wagner's Grade of Ulcer:

Treatment Given:

1) Debridement
2) Skin Graft
3) Amputation
    a) Toe
    b) Trans Metatarsal
    c) Trans Tibial
    d) Trans Femoral

# MASTER CHART

| S.NO | NAME | Age | Sex | IP NO | PN | PVD | TREATMENT |
|---|---|---|---|---|---|---|---|
| 1 | Peumal | 39 | M | 92182 | - | - | DEBRIDEMENT |
| 2 | Kuppammal | 71 | F | 52132 | + | + | BK AMPUTATION |
| 3 | Andy | 49 | M | 67694 | - | - | DEBRIDEMENT |
| 4 | Lakshmi | 61 | F | 51213 | - | - | DEBRIDEMENT |
| 5 | Periakaruppan | 55 | M | 43441 | + | + | TOE AMPUTATION |
| 6 | Sundaram | 59 | M | 43529 | - | - | DEBRIDEMENT |
| 7 | Murugeshwari | 54 | F | 43114 | - | - | DEBRIDEMENT |
| 8 | Irulandi | 62 | M | 45237 | + | - | AK AMPUTATION |
| 9 | Murugayee | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 10 | Jesudhas | 51 | M | 43498 | - | -- | DEBRIDEMENT |
| 11 | Kumaran | 48 | M | 47213 | + | + | DEBRIDEMENT |
| 12 | Murugan | 59 | M | 53421 | - | - | DEBRIDEMENT |
| 13 | Pandiammal | 42 | F | 56432 | + | - | TOE AMPUTATION |
| 14 | Saraswathi | 38 | F | 78342 | - | - | DEBRIDEMENT |
| 15 | Muneeswaran | 58 | M | 54713 | - | -- | DEBRIDEMENT |
| 16 | Venu | 65 | M | 56821 | + | + | TRANSMETATARSAL AMPUTATION |
| 17 | Pappammal | 37 | F | 58231 | - | - | DEBRIDEMENT |
| 18 | Pandi | 67 | M | 43672 | -- | -- | DEBRIDEMENT |
| 19 | Mariammal | 53 | F | 58953 | -- | - | DEBRIDEMENT |
| 20 | Muthukumar | 72 | M | 57213 | + | - | TOE AMPUTATION |
| 21 | Raja | 35 | M | 61231 | - | + | DEBRIDEMENT |
| 22 | Rakkayi | 46 | F | 83114 | - | - | DEBRIDEMENT |
| 23 | Pitchandi | 58 | M | 67231 | - | - | DEBRIDEMENT |
| 24 | Vanitha | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 25 | Madhavan | 67 | M | 70112 | + | - | BK AMPUTATION |
| 26 | Balakumaran | 47 | M | 79231 | - | - | DEBRIDEMENT |
| 27 | Pandiselvi | 65 | F | 29466 | + | + | TOE AMPUTATION |
| 28 | Irulappan | 60 | M | 82331 | - | - | DEBRIDEMENT |
| 29 | Kumari | 64 | F | 65324 | - | - | DEBRIDEMENT |
| 30 | Irshad | 54 | M | 67923 | - | - | DEBRIDEMENT |
| 31 | Raman | 57 | M | 25643 | - | - | DEBRIDEMENT |
| 32 | Selvi | 50 | F | 78324 | - | - | DEBRIDEMENT |
| 33 | Sonai | 55 | M | 20452 | - | - | DEBRIDEMENT |
| 34 | Vani | 60 | F | 68345 | + | - | DEBRIDEMENT |
| 35 | Kannan | 45 | M | 87562 | - | - | DEBRIDEMENT |
| 36 | Ambalam | 55 | M | 78452 | - | - | DEBRIDEMENT |
| 37 | Rajadurai | 67 | M | 67497 | - | - | DEBRIDEMENT |
| 38 | Balamurugan | 43 | M | 76783 | - | - | DEBRIDEMENT |
| 39 | rajathi | 55 | F | 58209 | - | - | DEBRIDEMENT |
| 40 | Balaji | 58 | M | 70958 | - | - | DEBRIDEMENT |
| 41 | Sadayandi | 64 | M | 87682 | - | - | DEBRIDEMENT |
| 42 | Sornam | 50 | F | 26986 | - | - | DEBRIDEMENT |
| 43 | Hazira Beeve | 37 | F | 76572 | - | - | SKIN GRAFT |
| 44 | Rajkumar | 56 | M | 74422 | - | - | DEBRIDEMENT |
| 45 | Rajeshwari | 45 | F | 76442 | - | - | DEBRIDEMENT |
| 46 | Suresh | 60 | M | 37641 | - | - | DEBRIDEMENT |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 47 | Mary | 42 | F | 68756 | - | - | DEBRIDEMENT |
| 48 | Peter | 45 | M | 56231 | - | - | DEBRIDEMENT |
| 49 | Padmini | 50 | F | 53551 | - | + | DEBRIDEMENT |
| 50 | Saravanan | 58 | M | 55132 | - | - | DEBRIDEMENT |
| 51 | Rajesh | 35 | M | 56524 | - | - | DEBRIDEMENT |
| 52 | Fathima | 74 | F | 62515 | + | + | AK AMPUTATION |
| 53 | Mohamad Rafiq | 39 | M | 58315 | - | - | DEBRIDEMENT |
| 54 | Rakku | 65 | F | 58423 | + | - | DEBRIDEMENT |
| 55 | Asif Ahmed | 70 | M | 50135 | -- | - | TOE AMPUTATION |
| 56 | Padmini | 34 | F | 53551 | - | - | DEBRIDEMENT |
| 57 | Raja | 45 | M | 57135 | - | - | DEBRIDEMENT |
| 58 | Subbulaxmi | 55 | F | 58135 | - | - | DEBRIDEMENT |
| 59 | Kukaravel | 59 | M | 60031 | + | + | BK AMPUTATION |
| 60 | Anandalaxmi | 62 | F | 61352 | - | - | DEBRIDEMENT |
| 61 | Padndian | 52 | M | 58832 | + | + | DEBRIDEMENT |
| 62 | Parameswari | 58 | F | 56235 | - | - | DEBRIDEMENT |
| 63 | Ganesan | 62 | M | 61239 | + | + | TOE AMPUTATION |
| 64 | Sasikala | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 65 | Yasin ahmed | 56 | M | 87652 | - | - | DEBRIDEMENT |
| 66 | Williams | 54 | M | 65542 | + | - | DEBRIDEMENT |
| 67 | Anandi | 45 | F | 65322 | + | + | BK AMPUTATION |
| 68 | Subramani | 55 | M | 86928 | - | - | DEBRIDEMENT |
| 69 | Manohari | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 70 | Sree kannan | 67 | M | 86432 | - | - | DEBRIDEMENT |
| 71 | Manivasagan | 57 | M | 84325 | - | - | DEBRIDEMENT |
| 72 | Laxmi | 46 | F | 96326 | - | - | DEBRIDEMENT |
| 73 | Venu Mahalingam | 72 | M | 97642 | + | + | DEBRIDEMENT |
| 74 | Karuppi | 56 | F | 96542 | - | - | DEBRIDEMENT |
| 75 | Palpandi | 58 | M | 96532 | + | - | TRANSMETATARSAL AMPUTATION |
| 76 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 77 | Sankari | 49 | F | 85425 | + | + | DEBRIDEMENT |
| 78 | Arumugam | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 79 | Sankaran | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 80 | Gowri | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 81 | Ayyakannu | 63 | m | 76523 | + | + | DEBRIDEMENT |
| 82 | Amirtham | 55 | F | 10392 | - | + | BK AMPUTATION |
| 83 | Kumaran | 63 | M | 86422 | - | - | DEBRIDEMENT |
| 84 | Sankari | 54 | F | 86432 | - | - | DEBRIDEMENT |
| 85 | Marimuthu | 64 | F | 86544 | + | + | TOE AMPUTATION |
| 86 | Subramani | 45 | M | 72763 | - | - | DEBRIDEMENT |
| 87 | Aruna | 56 | F | 85422 | - | - | DEBRIDEMENT |
| 88 | Kumaravel | 74 | M | 78424 | + | + | DEBRIDEMENT |
| 89 | Meena | 52 | F | 86456 | - | - | SKIN GRAFT |
| 90 | Arumugam | 56 | M | 86534 | - | - | DEBRIDEMENT |
| 91 | Pandi | 65 | M | 97652 | + | + | DEBRIDEMENT |
| 92 | Arasi | 53 | F | 82656 | - | - | DEBRIDEMENT |
| 93 | Muthu | 56 | M | 96245 | + | - | TOE AMPUTATION |

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|---|---|---|---|---|---|---|---|
| 94 | Mari | 56 | F | 95452 | - | - | DEBRIDEMENT |
| 95 | Kumar | 67 | M | 95252 | + | - | DEBRIDEMENT |
| 96 | Prashanth | 59 | M | 82545 | - | - | DEBRIDEMENT |
| 97 | Rajeswari | 47 | F | 82547 | + | + | TOE AMPUTATION |
| 98 | Karuppiah | 60 | M | 86524 | - | - | DEBRIDEMENT |
| 99 | Rakku | 63 | F | 92546 | - | - | DEBRIDEMENT |
| 100 | Santhanam | 65 | M | 97523 | - | - | DEBRIDEMENT |
| 101 | Thiyagu | 73 | M | 92455 | + | + | DEBRIDEMENT |
| 102 | Rasu | 65 | M | 82548 | - | - | DEBRIDEMENT |
| 103 | Arasi | 43 | F | 72542 | + | + | BK AMPUTATION |
| 104 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 105 | Sankari | 49 | F | 85425 | + | - | DEBRIDEMENT |
| 106 | Arumugam | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 107 | Sankaran | 64 | M | 96525 | - | + | DEBRIDEMENT |
| 108 | Gowri | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 109 | Ayyakannu | 63 | m | 76523 | - | - | DEBRIDEMENT |
| 110 | Vadivel | 71 | M | 95654 | + | - | DEBRIDEMENT |
| 111 | Saranya | 36 | F | 86512 | - | - | DEBRIDEMENT |
| 112 | John | 55 | M | 95276 | - | - | DEBRIDEMENT |
| 113 | Vedanayagam | 63 | M | 96425 | + | + | TOE AMPUTATION |
| 114 | Vasanthi | 70 | F | 68754 | - | - | DEBRIDEMENT |
| 115 | Viruman | 45 | M | 86422 | - | - | DEBRIDEMENT |
| 116 | Perumathal | 52 | F | 66524 | - | - | DEBRIDEMENT |
| 117 | Muthupandi | 57 | M | 96526 | + | - | TOE AMPUTATION |
| 118 | Rani | 47 | F | 68782 | - | - | DEBRIDEMENT |
| 119 | Sarkkarai | 58 | M | 97562 | - | + | DEBRIDEMENT |
| 120 | Veerayee | 48 | F | 69862 | - | - | DEBRIDEMENT |
| 121 | Marimutu | 62 | M | 95421 | + | + | AK AMPUTATION |
| 122 | Poomayil | 45 | F | 66232 | - | - | DEBRIDEMENT |
| 123 | Raj | 32 | M | 66342 | - | - | DEBRIDEMENT |
| 124 | Nisha | 38 | F | 58782 | - | - | DEBRIDEMENT |
| 125 | Karthikeyan | 54 | M | 90802 | + | - | DEBRIDEMENT |
| 126 | Vairavan | 63 | M | 70520 | - | - | TRANSMETATARSAL AMPUTATION |
| 127 | Kanaga | 53 | F | 80527 | - | - | DEBRIDEMENT |
| 128 | Murugan | 58 | M | 80525 | - | - | DEBRIDEMENT |
| 129 | Muthumari | 64 | F | 90627 | + | - | DEBRIDEMENT |
| 130 | Alagarsamy | 62 | M | 78097 | + | + | AK AMPUTATION |
| 131 | Anbu | 49 | M | 90526 | - | - | DEBRIDEMENT |
| 132 | Maheswari | 53 | F | 50275 | - | - | DEBRIDEMENT |
| 133 | Palaniyandi | 58 | M | 89526 | - | - | DEBRIDEMENT |
| 134 | Sundari | 50 | F | 69202 | + | - | TOE AMPUTATION |
| 135 | Mohan | 60 | M | 90523 | - | - | DEBRIDEMENT |
| 136 | Pandian | 62 | M | 80256 | + | - | BK AMPUTATION |
| 137 | Maritammal | 50 | F | 70267 | - | - | DEBRIDEMENT |
| 138 | Manohari | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 139 | Sree kannan | 67 | M | 86432 | - | - | SKIN GRAFT |
| 140 | Manivasagan | 57 | M | 84325 | - | - | DEBRIDEMENT |

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|---|---|---|---|---|---|---|---|
| 141 | Laxmi | 46 | F | 96326 | - | - | DEBRIDEMENT |
| 142 | Venu Mahalingam | 72 | M | 97642 | + | + | DEBRIDEMENT |
| 143 | Karuppi | 56 | F | 96542 | - | - | DEBRIDEMENT |
| 144 | Mookapillai | 62 | M | 70256 | - | - | DEBRIDEMENT |
| 145 | Lakshmi | 56 | F | 90267 | + | + | AK AMPUTATION |
| 146 | Rajasundaram | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 147 | Sankaramalingam | 49 | M | 85425 | + | + | DEBRIDEMENT |
| 148 | Arumainayagam | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 149 | Samson | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 150 | Gowrishankar | 53 | M | 84326 | + | + | DEBRIDEMENT |
| 151 | Boominathan | 57 | M | 40257 | - | - | DEBRIDEMENT |
| 152 | Sundari | 54 | F | 60272 | - | - | DEBRIDEMENT |
| 153 | Selvakumar | 57 | M | 89272 | - | - | DEBRIDEMENT |
| 154 | Mallika | 48 | F | 78297 | - | - | DEBRIDEMENT |
| 155 | Kumaresan | 60 | M | 89251 | - | - | DEBRIDEMENT |
| 156 | Seethai | 48 | F | 40271 | + | - | TOE AMPUTATION |
| 157 | Andiyappan | 69 | M | 70182 | - | - | DEBRIDEMENT |
| 158 | Pasupathy | 58 | M | 72492 | - | - | DEBRIDEMENT |
| 159 | Pappammal | 37 | F | 58231 | - | - | DEBRIDEMENT |
| 160 | Pandi | 67 | M | 43672 | -- | -- | DEBRIDEMENT |
| 161 | Mariammal | 53 | F | 58953 | -- | - | DEBRIDEMENT |
| 162 | Muthukumar | 52 | M | 57213 | + | + | BK AMPUTATION |
| 163 | Raja | 35 | M | 61231 | - | - | DEBRIDEMENT |
| 164 | Rakkayi | 46 | F | 83114 | - | - | DEBRIDEMENT |
| 165 | Pitchandi | 58 | M | 67231 | + | + | DEBRIDEMENT |
| 166 | Vanitha | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 167 | Vasuki | 50 | F | 70281 | + | - | DEBRIDEMENT |
| 168 | Senniappan | 59 | M | 79021 | - | - | DEBRIDEMENT |
| 169 | Mudalaiyammal | 47 | F | 50217 | - | - | DEBRIDEMENT |
| 170 | Subburaj | 43 | M | 89202 | - | - | DEBRIDEMENT |
| 171 | Latha | 56 | F | 70245 | + | + | BK AMPUTATION |
| 172 | Chandran | 65 | M | 90256 | - | - | DEBRIDEMENT |
| 173 | Revathy | 73 | F | 60270 | + | + | DEBRIDEMENT |
| 174 | Manoharan | 53 | M | 30271 | - | - | DEBRIDEMENT |
| 175 | Jamuna | 54 | F | 62912 | - | - | TOE AMPUTATION |
| 176 | Ismail | 63 | M | 72928 | - | - | DEBRIDEMENT |
| 177 | Kani | 45 | F | 52902 | - | + | SKIN GRAFT |
| 178 | Praveen | 59 | M | 82652 | + | - | DEBRIDEMENT |
| 179 | Rukmani | 47 | F | 72078 | - | - | DEBRIDEMENT |
| 180 | Mahalingam | 67 | M | 26591 | + | + | AK AMPUTATION |
| 181 | Ramesh | 56 | M | 72921 | - | - | DEBRIDEMENT |
| 182 | Poongodi | 46 | F | 28038 | - | - | DEBRIDEMENT |

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|---|---|---|---|---|---|---|---|
| 183 | Ravi | 39 | M | 28762 | -- | - | DEBRIDEMENT |
| 184 | Sridurga | 56 | F | 92690 | + | - | TOE AMPUTATION |
| 185 | Balaji | 58 | M | 70958 | - | - | DEBRIDEMENT |
| 186 | Sadayandi | 64 | M | 87682 | - | + | DEBRIDEMENT |
| 187 | Sornam | 50 | F | 26986 | - | - | TRANS METATARSAL AMPUTATION |
| 188 | Hazira Beeve | 37 | F | 76572 | + | - | DEBRIDEMENT |

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|---|---|---|---|---|---|---|---|
| 189 | Rajkumar | 56 | M | 74422 | - | - | DEBRIDEMENT |
| 190 | Rajeshwari | 45 | F | 76442 | + | - | DEBRIDEMENT |
| 191 | Suresh | 60 | M | 37641 | - | - | DEBRIDEMENT |
| 192 | Subbulaxmi | 45 | F | 82092 | - | - | DEBRIDEMENT |
| 193 | Shanthi | 53 | F | 91071 | - | - | DEBRIDEMENT |
| 194 | Ganesan | 67 | M | 27809 | - | + | DEBRIDEMENT |
| 195 | KarUmayan | 56 | M | 69826 | + | + | AK AMPUTATION |
| 196 | Saroja | 48 | F | 70922 | - | - | DEBRIDEMENT |
| 197 | Ayyappan | 76 | M | 99762 | + | - | DEBRIDEMENT |
| 198 | Tamilselvi | 67 | F | 88521 | + | - | DEBRIDEMENT |
| 199 | Narayanan | 49 | M | 80972 | - | + | DEBRIDEMENT |
| 200 | Rakesh | 67 | M | 26987 | - | - | DEBRIDEMENT |
| 201 | Nafeesa | 56 | F | 80974 | -- | - | DEBRIDEMENT |
| 202 | Pandiarajan | 39 | M | 87562 | - | - | DEBRIDEMENT |
| 203 | Nagavalli | 67 | F | 80972 | + | + | TOE AMPUTATION |
| 204 | Marimuthu | 72 | M | 89762 | - | - | DEBRIDEMENT |
| 205 | Amirtham | 53 | F | 27982 | - | - | DEBRIDEMENT |
| 206 | Valli | 43 | F | 78622 | - | - | DEBRIDEMENT |
| 207 | Suresh | 58 | M | 25872 | - | - | DEBRIDEMENT |
| 208 | Venkatachalam | 52 | M | 28272 | + | + | BK AMPUTATION |
| 209 | Velumayil | 49 | F | 70982 | - | - | DEBRIDEMENT |
| 210 | Veeranan | 65 | M | 62982 | - | - | DEBRIDEMENT |
| 211 | Yasin Banu | 45 | F | 27908 | - | - | DEBRIDEMENT |
| 212 | Rathinam | 67 | M | 27091 | + | - | TRANSMETATARSAL AMPUTATION |
| 213 | Pandiyammal | 26 | F | 58261 | - | - | DEBRIDEMENT |
| 214 | Manickam | 56 | M | 29851 | - | - | DEBRIDEMENT |
| 215 | Pitchandi | 58 | M | 67231 | - | - | SKIN GRAFT |
| 216 | Vanitha | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 217 | Vasuki | 50 | F | 70281 | + | - | DEBRIDEMENT |
| 218 | Senniappan | 59 | M | 79021 | - | + | DEBRIDEMENT |
| 219 | Mudalaiyammal | 47 | F | 50217 | - | - | DEBRIDEMENT |
| 220 | Chandrasekar | 65 | M | 29818 | + | + | TOE AMPUTATION |
| 221 | Velunatchi | 56 | F | 62987 | + | - | AK AMPUTATION |
| 222 | Sarkkarai | 58 | M | 97562 | - | - | DEBRIDEMENT |
| 223 | Veerayee | 48 | F | 69862 | - | - | DEBRIDEMENT |
| 224 | Marimutu | 62 | M | 95421 | + | + | BK AMPUTATION |
| 225 | Poomayil | 45 | F | 66232 | - | - | DEBRIDEMENT |
| 226 | Upili | 56 | M | 72981 | - | - | DEBRIDEMENT |

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|---|---|---|---|---|---|---|---|
| 227 | Balkis | 42 | F | 72982 | + | - | DEBRIDEMENT |
| 228 | Rajendran | 67 | M | 26981 | + | - | DEBRIDEMENT |
| 229 | Jemima | 52 | F | 27091 | - | + | TOE AMPUTATION |
| 230 | Veerappan | 56 | M | 27809 | -- | - | DEBRIDEMENT |
| 231 | Sudhamani | 45 | F | 28092 | - | - | DEBRIDEMENT |
| 232 | Thalamuthu | 45 | M | 27973 | -- | - | DEBRIDEMENT |
| 233 | Chinnathai | 67 | F | 51978 | - | - | DEBRIDEMENT |
| 234 | Peter | 45 | M | 56231 | - | - | DEBRIDEMENT |

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|---|---|---|---|---|---|---|---|
| 235 | Nafeesa | 56 | F | 80974 | -- | - | DEBRIDEMENT |
| 236 | Pandiarajan | 39 | M | 87562 | - | - | DEBRIDEMENT |
| 237 | Nagavalli | 67 | F | 80972 | + | + | TOE AMPUTATION |
| 238 | Mohan | 60 | M | 90523 | - | - | DEBRIDEMENT |
| 239 | Pandian | 62 | M | 80256 | + | + | BK AMPUTATION |
| 240 | Maritammal | 50 | F | 70267 | - | - | DEBRIDEMENT |
| 241 | Manohari | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 242 | Sundaram | 59 | M | 43529 | - | - | DEBRIDEMENT |
| 243 | Murugeshwari | 54 | F | 43114 | + | - | DEBRIDEMENT |
| 244 | Irulandi | 62 | M | 45237 | + | + | AK AMPUTATION |
| 245 | Murugayee | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 246 | Jesudhas | 51 | M | 43498 | - | -- | DEBRIDEMENT |
| 247 | Parameswari | 58 | F | 56235 | - | - | DEBRIDEMENT |
| 248 | Ganesan | 62 | M | 61239 | + | + | TOE AMPUTATION |
| 249 | Sasikala | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 250 | Sarkkarai | 58 | M | 97562 | - | - | DEBRIDEMENT |
| 251 | Rajeshwari | 45 | F | 76442 | + | - | DEBRIDEMENT |
| 252 | Suresh | 60 | M | 37541 | - | - | DEBRIDEMENT |
| 253 | Subbulaxmi | 45 | F | 82092 | - | - | DEBRIDEMENT |
| 254 | Shanthi | 37 | F | 91671 | - | - | DEBRIDEMENT |
| 255 | Rajathi | 56 | F | 90267 | + | - | AK AMPUTATION |
| 256 | Rajasundaram | 38 | M | 96422 | - | - | DEBRIDEMENT |
| 257 | Sankaramalingam | 49 | M | 85478 | + | + | DEBRIDEMENT |
| 258 | Nisha | 38 | F | 58752 | - | - | DEBRIDEMENT |
| 259 | Karthikeyan | 54 | M | 90802 | + | - | DEBRIDEMENT |
| 260 | Vairavarajan | 54 | M | 70580 | - | - | TRANSMETATARSAL AMPUTATION |
| 261 | Padmini | 34 | F | 53551 | - | - | DEBRIDEMENT |
| 262 | Rajan | 45 | M | 57135 | - | - | DEBRIDEMENT |
| 263 | Subbulaxmi | 55 | F | 58135 | - | - | DEBRIDEMENT |
| 264 | Kumaravelan | 59 | M | 60031 | + | + | DEBRIDEMENT |
| 265 | Anandalaxmi | 62 | F | 61352 | - | - | DEBRIDEMENT |

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|---|---|---|---|---|---|---|---|
| 266 | Kumaran | 48 | M | 47213 | - | - | DEBRIDEMENT |
| 267 | Muruganandam | 59 | M | 53421 | - | - | DEBRIDEMENT |
| 268 | Kulandaiammal | 53 | F | 56432 | + | - | TOE AMPUTATION |
| 269 | Saraswathiammal | 38 | F | 78342 | - | - | DEBRIDEMENT |
| 270 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 271 | Sankari | 49 | F | 85425 | + | - | DEBRIDEMENT |
| 272 | Arumugapandi | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 273 | Sankaran | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 274 | Gowri rani | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 275 | Venkatachalapathy | 52 | M | 28272 | - | + | BK AMPUTATION |
| 276 | Velumayil | 49 | F | 70982 | + | - | DEBRIDEMENT |
| 277 | Veeran | 65 | M | 62982 | - | - | DEBRIDEMENT |
| 278 | Selvakumar | 57 | M | 89272 | - | - | DEBRIDEMENT |
| 279 | Mallika | 48 | F | 78297 | - | - | DEBRIDEMENT |
| 280 | Kumaresan | 60 | M | 89251 | - | - | SKIN GRAFT |
| 281 | Sree kannan | 67 | M | 86432 | + | - | DEBRIDEMENT |
| 282 | Manivasagan | 57 | M | 84325 | - | + | DEBRIDEMENT |
| 283 | Rakkammal | 63 | F | 92546 | - | - | DEBRIDEMENT |
| 284 | Santhanam | 65 | M | 97523 | - | - | DEBRIDEMENT |
| 285 | Thiyagu | 73 | M | 92455 | + | - | DEBRIDEMENT |
| 286 | Rasukutty | 55 | M | 82248 | - | - | DEBRIDEMENT |
| 287 | Mani | 57 | M | 84325 | - | - | DEBRIDEMENT |
| 288 | John | 56 | M | 26877 | - | - | DEBRIDEMENT |
| 289 | Laxmi | 46 | F | 96326 | - | - | TOE AMPUTATION |
| 290 | Venu | 72 | M | 97642 | + | - | DEBRIDEMENT |
| 291 | Kumaran | 63 | M | 86422 | - | - | DEBRIDEMENT |
| 292 | Sankari | 54 | F | 86432 | - | - | DEBRIDEMENT |
| 293 | Mariraja | 54 | M | 86544 | + | - | TOE AMPUTATION |
| 294 | Subramani | 45 | M | 72763 | - | - | DEBRIDEMENT |
| 295 | Boominathan | 57 | M | 40257 | - | - | DEBRIDEMENT |
| 296 | Sundari | 54 | F | 60272 | - | - | DEBRIDEMENT |
| 297 | Ganesan | 67 | M | 27809 | - | + | DEBRIDEMENT |
| 298 | Kamaraj | 56 | M | 69826 | - | - | BK AMPUTATION |
| 299 | Saroja RANI | 48 | F | 70922 | - | - | DEBRIDEMENT |
| 300 | Ayyappan | 76 | M | 99762 | + | - | DEBRIDEMENT |
| 301 | Sasikala | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 302 | Yasin ahmed | 56 | M | 87652 | - | - | DEBRIDEMENT |
| 303 | Williams | 54 | M | 65542 | - | - | DEBRIDEMENT |
| 304 | Anandiammal | 64 | F | 65322 | + | + | AK AMPUTATION |
| 305 | Subramani | 55 | M | 86928 | - | - | DEBRIDEMENT |
| 306 | Manohari | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 307 | kannan | 67 | M | 86432 | - | + | DEBRIDEMENT |
| 308 | Amirtham | 53 | F | 27982 | - | - | DEBRIDEMENT |
| 309 | Vallithai | 43 | F | 78622 | + | - | DEBRIDEMENT |
| 310 | Suresh rajan | 58 | M | 25872 | - | - | DEBRIDEMENT |
| 311 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 312 | Sankari durga | 59 | F | 85425 | + | + | TOE AMPUTATION |
| 313 | Arumugam | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 314 | Sankaran | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 315 | Pappammal | 37 | F | 58231 | - | - | DEBRIDEMENT |
| 316 | Pandi | 67 | M | 43672 | -- | -- | DEBRIDEMENT |
| 317 | Mariammal | 53 | F | 58953 | -- | - | DEBRIDEMENT |
| 318 | Muthusundar | 65 | M | 57213 | + | + | BK AMPUTATION |
| 319 | Raja rajan | 35 | M | 61231 | - | - | DEBRIDEMENT |
| 320 | Rakkayi | 46 | F | 83114 | - | - | DEBRIDEMENT |
| 321 | Rajeshwari | 45 | F | 76442 | + | - | DEBRIDEMENT |
| 322 | Suresh | 60 | M | 37541 | - | - | DEBRIDEMENT |
| 323 | Palpandi | 58 | M | 96532 | + | + | TOE AMPUTATION |

| 324 | Udayakumar | 58 | M | 96422 | + | - | DEBRIDEMENT |
|---|---|---|---|---|---|---|---|
| 325 | Sankari rakku | 49 | F | 85425 | + | + | DEBRIDEMENT |
| 326 | Arumugam | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 327 | Sankaramahalingam | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 328 | Gowri shankar | 53 | F | 84326 | - | + | AK AMPUTATION |
| 329 | Rajendran | 67 | M | 26981 | + | + | DEBRIDEMENT |
| 330 | Jemima rajesh | 52 | F | 27091 | - | + | DEBRIDEMENT |
| 331 | Veerappa moily | 56 | M | 27809 | -- | - | DEBRIDEMENT |
| 332 | Sudhamani | 45 | F | 28092 | - | - | DEBRIDEMENT |
| 333 | Thalavai | 45 | M | 27973 | -- | - | DEBRIDEMENT |
| 334 | Chinnathai | 67 | F | 51978 | - | - | DEBRIDEMENT |
| 335 | Peter Joseph | 45 | M | 56231 | - | - | SKIN GRAFT |
| 336 | Rajkumar | 56 | M | 74422 | - | - | DEBRIDEMENT |
| 337 | Rajeshwari | 45 | F | 76442 | + | - | DEBRIDEMENT |
| 338 | Suresh venkatesh | 60 | M | 37641 | - | - | TOE AMPUTATION |
| 339 | Subbuthai | 45 | F | 82092 | - | - | DEBRIDEMENT |
| 340 | Shanthi nirmala | 59 | F | 91071 | - | - | DEBRIDEMENT |
| 341 | Rajasundaram | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 342 | Sankara subbu | 49 | M | 85425 | + | + | TRANS METATARSAL AMPUTATION |
| 343 | Nayagam | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 344 | Arumugam | 56 | M | 86534 | - | - | DEBRIDEMENT |
| 345 | Pandi raj | 65 | M | 97652 | + | + | DEBRIDEMENT |
| 346 | Arasi rajathi | 53 | F | 82656 | - | - | DEBRIDEMENT |
| 347 | Murugayee | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 348 | Jesudhas | 51 | M | 43498 | - | -- | DEBRIDEMENT |
| 349 | Parameswari | 58 | F | 56235 | - | - | DEBRIDEMENT |
| 350 | Christopher | 62 | M | 61239 | + | + | TOE AMPUTATION |
| 351 | Sasi | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 352 | Sarkkarai | 58 | M | 97562 | - | - | DEBRIDEMENT |
| 353 | Rajeshwari | 45 | F | 76442 | + | + | DEBRIDEMENT |
| 354 | Suresh | 60 | M | 37541 | - | - | DEBRIDEMENT |
| 355 | Subbulaxmi | 45 | F | 82092 | - | - | DEBRIDEMENT |
| 356 | Stephie | 37 | F | 91671 | - | - | DEBRIDEMENT |
| 357 | Fathima | 74 | F | 62515 | + | + | AK AMPUTATION |
| 358 | Mohamad Rafiq | 39 | M | 58315 | - | - | DEBRIDEMENT |
| 359 | Rakku | 65 | F | 58423 | + | - | DEBRIDEMENT |
| 360 | Faiz  Ahmed | 70 | M | 50135 | -- | - | TOE AMPUTATION |
| 361 | Padmini | 34 | F | 53551 | - | - | DEBRIDEMENT |
| 362 | Saravana Raja | 45 | M | 57135 | - | - | DEBRIDEMENT |
| 363 | Muthulaxmi | 55 | F | 58135 | - | - | DEBRIDEMENT |
| 364 | Pandi | 67 | M | 43672 | -- | -- | DEBRIDEMENT |
| 365 | Mariammal | 53 | F | 58953 | -- | - | DEBRIDEMENT |
| 366 | Lenin | 52 | M | 57213 | + | - | BK AMPUTATION |
| 367 | Raja | 35 | M | 61231 | - | - | SKIN GRAFT |
| 368 | Rakkayi | 46 | F | 83114 | - | - | DEBRIDEMENT |
| 369 | Pitchandi | 58 | M | 67231 | - | - | DEBRIDEMENT |
| 370 | Vanitha kumari | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 371 | Vasuki | 50 | F | 70281 | + | + | DEBRIDEMENT |
| 372 | Senniappan | 59 | M | 79021 | - | - | DEBRIDEMENT |
| 373 | Raniyammal | 47 | F | 50217 | - | - | DEBRIDEMENT |
| 374 | Narayanan | 49 | M | 80972 | - | - | DEBRIDEMENT |
| 375 | Rakesh | 67 | M | 26987 | - | - | DEBRIDEMENT |
| 376 | Nafeesa | 56 | F | 80974 | -- | - | TOE AMPUTATION |
| 377 | Pandiarajan | 39 | M | 87562 | - | - | DEBRIDEMENT |
| 378 | Nagasundar | 67 | F | 80972 | - | - | DEBRIDEMENT |
| 379 | Mariammmal | 56 | F | 95452 | - | - | DEBRIDEMENT |
| 380 | Kumar | 67 | M | 95252 | + | + | DEBRIDEMENT |
| 381 | Prashanth | 59 | M | 82545 | - | - | DEBRIDEMENT |

| 382 | Rajeswari | 47 | F | 82547 | - | - | TOE AMPUTATION |
|---|---|---|---|---|---|---|---|
| 383 | Karuppiah | 60 | M | 86524 | - | - | DEBRIDEMENT |
| 384 | Rakku | 63 | F | 92546 | - | - | DEBRIDEMENT |
| 385 | Santhanam | 65 | M | 97523 | - | + | DEBRIDEMENT |
| 386 | Thiyagu | 73 | M | 92455 | - | - | DEBRIDEMENT |
| 387 | Rasu | 65 | M | 82548 | - | - | DEBRIDEMENT |
| 388 | Maheswari | 43 | F | 72542 | + | + | BK AMPUTATION |
| 389 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 390 | Perumal | 39 | M | 92182 | - | - | DEBRIDEMENT |
| 391 | Kuppammal | 71 | F | 52132 | - | - | DEBRIDEMENT |
| 392 | Andy | 49 | M | 67694 | - | - | DEBRIDEMENT |
| 393 | Lakshmi | 61 | F | 51213 | + | - | DEBRIDEMENT |
| 394 | Periakaruppan | 55 | M | 43441 | - | + | BK AMPUTATION |
| 395 | Sundaram | 59 | M | 43529 | - | - | DEBRIDEMENT |
| 396 | Murugeshwari | 54 | F | 43114 | - | - | DEBRIDEMENT |
| 397 | Irulandi | 62 | M | 45237 | - | - | DEBRIDEMENT |
| 398 | Murugayee | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 399 | Anandiammal | 64 | F | 65322 | - | - | DEBRIDEMENT |
| 400 | Subramani | 55 | M | 86928 | - | - | DEBRIDEMENT |
| 401 | Manohari | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 402 | Nafiz MOhammed | 39 | M | 62978 | - | - | DEBRIDEMENT |
| 403 | Velumayil | 49 | F | 70982 | - | - | DEBRIDEMENT |
| 404 | Veeranan | 65 | M | 62982 | - | - | DEBRIDEMENT |
| 405 | Yasin Banu | 45 | F | 27908 | - | - | DEBRIDEMENT |
| 406 | Rathinam Paul | 67 | M | 27091 | + | - | TOE AMPUTATION |
| 407 | Pandiyammal | 26 | F | 58261 | - | - | DEBRIDEMENT |
| 408 | Manickam | 56 | M | 29851 | - | - | DEBRIDEMENT |
| 409 | Pitchandi | 58 | M | 67231 | - | - | DEBRIDEMENT |
| 410 | Vanitha | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 411 | Vasuki Devi | 50 | F | 70281 | + | + | AK AMPUTATION |
| 412 | Mani | 57 | M | 84325 | - | - | DEBRIDEMENT |
| 413 | John abraham | 56 | M | 26877 | - | - | DEBRIDEMENT |
| 414 | Laxmi | 46 | F | 96326 | - | - | DEBRIDEMENT |
| 415 | Venu gopal | 72 | M | 97642 | + | - | DEBRIDEMENT |
| 416 | Mahalingam | 67 | M | 26591 | + | + | AK AMPUTATION |
| 417 | Ramesh | 56 | M | 72921 | - | - | DEBRIDEMENT |
| 418 | Poongodi | 46 | F | 28038 | - | - | DEBRIDEMENT |
| 419 | Ravi | 39 | M | 28762 | -- | - | DEBRIDEMENT |
| 420 | Sridevi | 56 | F | 92690 | + | - | BK AMPUTATION |
| 421 | Balaji | 58 | M | 70958 | - | - | DEBRIDEMENT |
| 422 | Sadayandi | 64 | M | 87682 | - | - | DEBRIDEMENT |
| 423 | Sornam felicia | 50 | F | 26986 | - | - | DEBRIDEMENT |
| 424 | Hazira Begum | 37 | F | 76572 | - | - | DEBRIDEMENT |
| 425 | Venu Mahalingam | 72 | M | 97642 | - | + | DEBRIDEMENT |
| 426 | Karuppi | 56 | F | 96542 | - | - | DEBRIDEMENT |
| 427 | Palpandi | 58 | M | 96532 | + | - | TRANSMETATARSAL AMPUTATION |
| 428 | Udayarani | 58 | F | 96422 | - | - | DEBRIDEMENT |
| 429 | Thangaraj | 49 | F | 85425 | - | - | DEBRIDEMENT |
| 430 | Arumugam pandi | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 431 | Aram | 64 | M | 96525 | + | + | DEBRIDEMENT |
| 432 | Ghulzar | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 433 | Ayyakannu | 63 | m | 76523 | - | - | TOE AMPUTATION |
| 434 | Rakku | 63 | F | 92546 | + | + | DEBRIDEMENT |
| 435 | Santhanam | 65 | M | 97523 | - | - | DEBRIDEMENT |
| 436 | Thiyagu | 73 | M | 92455 | - | - | DEBRIDEMENT |
| 437 | Rasu | 65 | M | 82548 | - | - | DEBRIDEMENT |
| 438 | Mookammal | 43 | F | 72542 | + | + | BK AMPUTATION |
| 439 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 440 | Anjalai | 49 | F | 85425 | - | - | DEBRIDEMENT |
| 441 | Arumugam | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 442 | Prasad | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 443 | Shankar | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 444 | Ayyakannu | 63 | m | 76523 | - | - | DEBRIDEMENT |
| 445 | Murugan | 71 | M | 95654 | + | - | TOE AMPUTATION |
| 446 | Sarvesh | 54 | F | 86432 | - | - | DEBRIDEMENT |
| 447 | Marimuthu | 64 | F | 86544 | - | - | DEBRIDEMENT |
| 448 | Rajma | 45 | M | 72763 | - | - | DEBRIDEMENT |
| 449 | Aruna | 56 | F | 85422 | - | - | DEBRIDEMENT |
| 450 | Kumaravel | 74 | M | 78424 | - | - | DEBRIDEMENT |
| 451 | Meena | 52 | F | 86456 | - | - | DEBRIDEMENT |
| 452 | Arumugam | 56 | M | 86534 | - | + | DEBRIDEMENT |
| 453 | Devi | 65 | M | 97652 | - | - | DEBRIDEMENT |
| 454 | Arasi | 53 | F | 82656 | - | - | DEBRIDEMENT |
| 455 | Muthukrishnan | 56 | M | 96245 | + | - | TOE AMPUTATION |
| 456 | Vivek | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 457 | Ayyakannu | 63 | m | 76523 | - | - | DEBRIDEMENT |
| 458 | Palani | 71 | M | 95654 | + | - | DEBRIDEMENT |
| 459 | Aashik ahmed | 56 | M | 80974 | -- | - | DEBRIDEMENT |
| 460 | Pandiarajan | 39 | M | 87562 | - | - | DEBRIDEMENT |
| 461 | Nagarajan | 67 | F | 80972 | + | + | TOE AMPUTATION |
| 462 | Mohan | 60 | M | 90523 | - | - | DEBRIDEMENT |
| 463 | Pandidurai | 62 | M | 80256 | + | + | BK AMPUTATION |
| 464 | Maritammal | 50 | F | 70267 | - | - | DEBRIDEMENT |
| 465 | Manohari | 52 | F | 86543 | - | - | DEBRIDEMENT |
| 466 | Sundarammal | 59 | F | 43529 | - | - | DEBRIDEMENT |
| 467 | Murugeshi | 54 | M | 43114 | - | - | SKIN GRAFT |
| 468 | Rani ammal | 47 | F | 68782 | - | - | DEBRIDEMENT |
| 469 | Sarkkarai | 58 | M | 97562 | - | + | DEBRIDEMENT |
| 470 | Veerayee | 48 | F | 69862 | - | - | DEBRIDEMENT |
| 471 | Kanniraj | 62 | M | 95421 | + | - | AK AMPUTATION |
| 472 | Poomayil | 45 | F | 66232 | - | - | DEBRIDEMENT |
| 473 | Raj | 32 | M | 66342 | - | - | DEBRIDEMENT |
| 474 | Nisha | 38 | F | 58782 | - | - | DEBRIDEMENT |
| 475 | Karthikeyan | 54 | M | 90802 | - | - | DEBRIDEMENT |
| 476 | Sivaraj | 63 | M | 70520 | - | - | TRANSMETATARSAL AMPUTATION |
| 477 | Kanaga | 53 | F | 80527 | - | - | DEBRIDEMENT |
| 478 | Murugan | 58 | M | 80525 | - | - | DEBRIDEMENT |
| 479 | Muthumari | 34 | F | 90627 | - | - | DEBRIDEMENT |
| 480 | Devasenathipathy | 62 | M | 78097 | + | + | DEBRIDEMENT |
| 481 | Anbu | 49 | M | 90526 | - | - | DEBRIDEMENT |
| 482 | Maheswari | 53 | F | 50275 | - | - | DEBRIDEMENT |
| 483 | Palaniyandi | 58 | M | 89526 | - | - | DEBRIDEMENT |
| 484 | Priyadarshinii | 50 | F | 69202 | + | - | TOE AMPUTATION |
| 485 | Mohan | 60 | M | 90523 | - | - | DEBRIDEMENT |
| 486 | Subramani | 45 | M | 72763 | - | - | DEBRIDEMENT |
| 487 | Aruna | 56 | F | 85422 | + | + | DEBRIDEMENT |
| 488 | Kumaravel | 74 | M | 78424 | - | - | DEBRIDEMENT |
| 489 | Meena | 52 | F | 86456 | - | - | DEBRIDEMENT |
| 490 | Arumugam | 56 | M | 86534 | - | - | SKIN GRAFT |
| 491 | Rajesh | 65 | M | 97652 | + | + | DEBRIDEMENT |
| 492 | Arasi | 53 | F | 82656 | - | - | DEBRIDEMENT |
| 493 | Marirajan | 54 | M | 86544 | + | - | TOE AMPUTATION |
| 494 | Subramani | 45 | M | 72763 | - | - | DEBRIDEMENT |
| 495 | Boopathy | 57 | M | 40257 | - | - | DEBRIDEMENT |
| 496 | Sundari | 54 | F | 60272 | - | - | DEBRIDEMENT |
| 497 | Ganesan | 67 | M | 27809 | - | + | DEBRIDEMENT |

| 498 | Karunanidhi | 56 | M | 69826 | - | - | BK AMPUTATION |
|---|---|---|---|---|---|---|---|
| 499 | Shalini | 48 | F | 70922 | - | - | DEBRIDEMENT |
| 500 | Ayyappan | 76 | M | 99762 | + | - | DEBRIDEMENT |
| 501 | Sasikala | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 502 | Yasin ahmed | 56 | M | 87652 | - | - | DEBRIDEMENT |
| 503 | Williams | 54 | M | 65542 | - | - | DEBRIDEMENT |
| 504 | Ananthanarayanan | 64 | M | 65322 | + | + | AK AMPUTATION |
| 505 | Subramani | 55 | M | 86928 | - | - | DEBRIDEMENT |
| 506 | Manohari | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 507 | Sankaran | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 508 | Gayathri | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 509 | Ayyakannu | 63 | m | 76523 | - | - | DEBRIDEMENT |
| 510 | Varun | 71 | M | 95654 | + | - | DEBRIDEMENT |
| 511 | Balaji | 58 | M | 70958 | - | - | DEBRIDEMENT |
| 512 | Sadayandi | 64 | M | 87682 | - | - | DEBRIDEMENT |
| 513 | Mary felicia | 50 | F | 26986 | - | + | DEBRIDEMENT |
| 514 | Asha Begum | 37 | F | 76572 | - | - | DEBRIDEMENT |
| 515 | Muneeswaran | 58 | M | 54713 | - | -- | DEBRIDEMENT |
| 516 | Venu | 65 | M | 56821 | - | - | DEBRIDEMENT |
| 517 | Pappammal | 37 | F | 58231 | - | - | DEBRIDEMENT |
| 518 | kumaravel | 67 | M | 43672 | -- | -- | DEBRIDEMENT |
| 519 | Mariammal | 53 | F | 58953 | -- | + | DEBRIDEMENT |
| 520 | Subash Bose | 72 | M | 57213 | + | - | TOE AMPUTATION |
| 521 | Raja sambandam | 35 | M | 61231 | - | - | DEBRIDEMENT |
| 522 | Rakku | 46 | F | 83114 | + | + | DEBRIDEMENT |
| 523 | Pitchandi | 58 | M | 67231 | - | - | DEBRIDEMENT |
| 524 | Vanitha kumari | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 525 | Manmadan | 67 | M | 70112 | + | + | BK AMPUTATION |
| 526 | Balakumaran | 47 | M | 79231 | - | - | DEBRIDEMENT |
| 527 | Ponmalar | 65 | F | 29466 | - | - | TOE AMPUTATION |
| 528 | Irulappan | 60 | M | 82331 | - | - | DEBRIDEMENT |
| 529 | Kumari | 64 | F | 65324 | + | - | DEBRIDEMENT |
| 530 | Irshad | 54 | M | 67923 | - | - | DEBRIDEMENT |
| 531 | Raman | 57 | M | 25643 | - | - | DEBRIDEMENT |
| 532 | Selvi | 50 | F | 78324 | - | - | DEBRIDEMENT |
| 533 | Sonai Muthu | 55 | M | 20452 | + | + | AK AMPUTATION |
| 534 | Vani | 60 | F | 68345 | + | - | DEBRIDEMENT |
| 535 | Kannan | 45 | M | 87562 | - | - | DEBRIDEMENT |
| 536 | Ambalavanan | 55 | M | 78452 | - | - | DEBRIDEMENT |
| 537 | Rajadurai | 67 | M | 67497 | - | - | DEBRIDEMENT |
| 538 | Balamurugan | 43 | M | 76783 | - | - | DEBRIDEMENT |
| 539 | Parvathi | 55 | F | 58209 | + | + | DEBRIDEMENT |
| 540 | Balaji nathan | 58 | M | 70958 | - | - | DEBRIDEMENT |
| 541 | Meena | 52 | F | 86543 | - | - | DEBRIDEMENT |
| 542 | Sundaram | 59 | M | 43529 | - | - | SKIN GRAFT |
| 543 | Murugeshwari | 54 | F | 43114 | - | - | DEBRIDEMENT |
| 544 | Iyengaran | 62 | M | 45237 | + | + | AK AMPUTATION |
| 545 | Murugayee | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 546 | Jesudhas | 51 | M | 43498 | - | -- | DEBRIDEMENT |
| 547 | Parameswari | 58 | F | 56235 | - | - | DEBRIDEMENT |
| 548 | Gandhimathi | 62 | F | 61239 | + | + | TOE AMPUTATION |
| 549 | Sasikala | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 550 | Sarkkarai | 58 | M | 97552 | - | - | DEBRIDEMENT |
| 551 | Rajeshwari | 45 | F | 76442 | - | - | DEBRIDEMENT |
| 552 | Suresh | 60 | M | 37541 | - | - | DEBRIDEMENT |
| 553 | Sumathi | 45 | F | 82092 | - | - | DEBRIDEMENT |
| 554 | Simirna | 37 | F | 91671 | - | + | DEBRIDEMENT |
| 555 | Kumaresan | 60 | M | 89251 | - | - | DEBRIDEMENT |

| 556 | Seethai ammal | 48 | F | 40271 | + | - | TOE AMPUTATION |
|---|---|---|---|---|---|---|---|
| 557 | Andiyappan | 69 | M | 70182 | - | - | DEBRIDEMENT |
| 558 | Pasupathy | 58 | M | 72492 | - | - | DEBRIDEMENT |
| 559 | Pappammal | 37 | F | 58231 | - | - | DEBRIDEMENT |
| 560 | Pandi | 67 | M | 43672 | -- | -- | DEBRIDEMENT |
| 561 | Mariammal | 53 | F | 58953 | -- | - | DEBRIDEMENT |
| 562 | Maruthupandian | 52 | M | 57213 | + | + | BK AMPUTATION |
| 563 | Raj | 35 | M | 61231 | - | - | DEBRIDEMENT |
| 564 | Rakkayi | 46 | F | 83114 | - | - | DEBRIDEMENT |
| 565 | Pitchayappan | 58 | M | 67231 | - | - | DEBRIDEMENT |
| 566 | Vidyasagar | 75 | M | 43655 | - | - | BK AMPUTATION |
| 567 | Sankaravathi | 49 | F | 85425 | - | - | DEBRIDEMENT |
| 568 | Amalan | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 569 | Sankaran | 64 | M | 96525 | - | + | DEBRIDEMENT |
| 570 | Grace | 53 | F | 84326 | + | - | DEBRIDEMENT |
| 571 | Saranya | 36 | F | 86512 | - | - | DEBRIDEMENT |
| 572 | John Santosh | 55 | M | 95276 | - | - | DEBRIDEMENT |
| 573 | Veda | 63 | F | 96425 | + | + | TOE AMPUTATION |
| 574 | Vasanthi | 70 | F | 68754 | - | - | DEBRIDEMENT |
| 575 | Viruman | 45 | M | 86422 | - | - | DEBRIDEMENT |
| 576 | Perumathal | 52 | F | 66524 | - | + | DEBRIDEMENT |
| 577 | Gopinath | 57 | M | 96526 | + | - | TOE AMPUTATION |
| 578 | Rani | 47 | F | 68782 | - | - | DEBRIDEMENT |
| 579 | Subbu | 58 | M | 97562 | + | + | DEBRIDEMENT |
| 580 | Veerayee | 48 | F | 69862 | - | - | DEBRIDEMENT |
| 581 | Sasikala | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 582 | Sarkkarai | 58 | M | 97562 | - | - | DEBRIDEMENT |
| 583 | Rajesh | 45 | M | 76442 | + | - | DEBRIDEMENT |
| 584 | Suresh | 60 | M | 37541 | + | + | DEBRIDEMENT |
| 585 | Subbuthai | 45 | F | 82092 | - | - | DEBRIDEMENT |
| 586 | Stephen | 37 | M | 91671 | - | - | DEBRIDEMENT |
| 587 | Farooq abdulla | 74 | F | 62515 | + | + | AK AMPUTATION |
| 588 | Mohamad Yusuf | 39 | M | 58315 | - | + | DEBRIDEMENT |
| 589 | Rita | 65 | F | 58423 | - | - | DEBRIDEMENT |
| 590 | Fertoz  Ahmed | 70 | M | 50135 | -- | - | TOE AMPUTATION |
| 591 | Padmini | 34 | F | 53551 | - | - | DEBRIDEMENT |
| 592 | Saravana Raja | 45 | M | 57135 | - | - | DEBRIDEMENT |
| 593 | Muthulaxmi | 55 | F | 58135 | - | + | DEBRIDEMENT |
| 594 | Purushothaman | 67 | M | 43672 | + | -- | DEBRIDEMENT |
| 595 | Venkat | 52 | M | 28272 | + | + | BK AMPUTATION |
| 596 | Valli | 49 | F | 70982 | - | - | DEBRIDEMENT |
| 597 | Veeran | 65 | M | 62982 | - | - | DEBRIDEMENT |
| 598 | Selvakumar | 57 | M | 89272 | + | - | DEBRIDEMENT |
| 599 | Mallika ambika | 48 | F | 78297 | - | + | DEBRIDEMENT |
| 600 | Kumaresan | 60 | M | 89251 | - | + | DEBRIDEMENT |
| 601 | Sree rajan | 67 | M | 86432 | + | - | DEBRIDEMENT |
| 602 | Manivasagan | 57 | M | 84325 | - | - | SKIN GRAFT |
| 603 | Rakkammal | 63 | F | 92546 | - | - | DEBRIDEMENT |
| 604 | Santhanam | 65 | M | 97523 | - | - | DEBRIDEMENT |
| 605 | Thiyagaraj | 73 | M | 92455 | + | - | DEBRIDEMENT |
| 606 | Rasukutty | 55 | M | 82248 | - | + | DEBRIDEMENT |
| 607 | Maniratnam | 57 | M | 84325 | - | - | DEBRIDEMENT |
| 608 | Pasupathy | 58 | M | 72492 | - | - | DEBRIDEMENT |
| 609 | Pappathy | 37 | F | 58231 | - | - | DEBRIDEMENT |
| 610 | Parthiban | 67 | M | 43672 | -- | + | DEBRIDEMENT |
| 611 | Mariammal | 53 | F | 58953 | + | - | DEBRIDEMENT |
| 612 | Muthukumar | 52 | M | 57213 | + | + | BK AMPUTATION |
| 613 | Rasukutty | 35 | M | 61231 | - | - | DEBRIDEMENT |

| 614 | Rakkayi | 46 | F | 83114 | - | - | DEBRIDEMENT |
|---|---|---|---|---|---|---|---|
| 615 | Pugalendi | 58 | M | 67231 | - | - | DEBRIDEMENT |
| 616 | Vanitha | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 617 | Varshita | 50 | F | 70281 | + | - | DEBRIDEMENT |
| 618 | Senniappan | 59 | M | 79021 | - | - | DEBRIDEMENT |
| 619 | Karthikeyan | 54 | M | 90802 | - | - | DEBRIDEMENT |
| 620 | Visvanathan | 54 | M | 70580 | - | + | TRANSMETATARSAL AMPUTATION |
| 621 | Padmini | 34 | F | 53551 | - | - | DEBRIDEMENT |
| 622 | Radish | 45 | M | 57135 | - | + | DEBRIDEMENT |
| 623 | Subbulaxmi | 55 | F | 58135 | - | - | DEBRIDEMENT |
| 624 | Karthikeyan | 45 | M | 52902 | - | - | DEBRIDEMENT |
| 625 | Praveen | 59 | M | 82652 | + | - | DEBRIDEMENT |
| 626 | Upili | 56 | M | 72981 | - | + | DEBRIDEMENT |
| 627 | Balkis fathima | 42 | F | 72982 | - | - | DEBRIDEMENT |
| 628 | Rajendran | 67 | M | 26981 | + | - | DEBRIDEMENT |
| 629 | Janet | 54 | F | 27091 | - | + | TOE AMPUTATION |
| 630 | Veerappamoily | 56 | M | 27809 | + | - | DEBRIDEMENT |
| 631 | Sudhamani | 45 | F | 28092 | - | - | DEBRIDEMENT |
| 632 | Thalamuthu | 45 | M | 27973 | -- | - | DEBRIDEMENT |
| 633 | Chinnathai | 67 | F | 51978 | - | - | SKIN GRAFT |
| 634 | Pethuru | 45 | M | 56231 | - | - | DEBRIDEMENT |
| 635 | Mohan kumar | 60 | M | 90523 | - | - | DEBRIDEMENT |
| 636 | Parameswaran | 62 | M | 80256 | - | - | BK AMPUTATION |
| 637 | Mariammal | 50 | F | 70267 | - | + | DEBRIDEMENT |
| 638 | Mangalam | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 639 | Santhakumar | 67 | M | 86432 | - | - | DEBRIDEMENT |
| 640 | Manivasagan | 57 | M | 84325 | - | - | DEBRIDEMENT |
| 641 | Rajasundari | 58 | F | 96422 | - | - | DEBRIDEMENT |
| 642 | Sunil | 49 | M | 85425 | + | + | TRANS METATARSAL AMPUTATION |
| 643 | NayagI | 62 | F | 85412 | - | - | DEBRIDEMENT |
| 644 | Arumugam | 56 | M | 86534 | - | - | DEBRIDEMENT |
| 645 | Pandi raj | 65 | M | 97652 | - | + | DEBRIDEMENT |
| 646 | Thilagavathi | 53 | F | 82656 | - | - | DEBRIDEMENT |
| 647 | Mark | 42 | M | 68756 | - | - | DEBRIDEMENT |
| 648 | Peter | 45 | M | 56231 | + | - | DEBRIDEMENT |
| 649 | Padmini | 50 | F | 53551 | - | - | DEBRIDEMENT |
| 650 | Saravanan | 58 | M | 55132 | + | - | DEBRIDEMENT |
| 651 | Rajesh kannan | 35 | M | 56524 | - | - | DEBRIDEMENT |
| 652 | Buvaneshwari | 45 | F | 76442 | + | - | DEBRIDEMENT |
| 653 | Suriyakumar | 60 | M | 37541 | - | - | DEBRIDEMENT |
| 654 | Mallika | 48 | F | 78297 | - | - | DEBRIDEMENT |
| 655 | Kumaresan | 60 | M | 89251 | - | - | DEBRIDEMENT |
| 656 | Seetharaman | 48 | M | 40271 | + | - | TOE AMPUTATION |
| 657 | Andiyappan | 69 | M | 70182 | - | - | DEBRIDEMENT |
| 658 | Pasupathy | 58 | M | 72492 | - | - | DEBRIDEMENT |
| 659 | Pappal | 37 | F | 58231 | - | - | DEBRIDEMENT |
| 660 | Pandi | 67 | M | 43672 | -- | + | DEBRIDEMENT |
| 661 | Mariammal | 53 | F | 58953 | -- | - | DEBRIDEMENT |
| 662 | Ravindar | 51 | M | 57233 | + | + | BK AMPUTATION |
| 663 | Rajan santhosam | 35 | M | 61231 | - | - | DEBRIDEMENT |
| 664 | Rakkayi | 46 | F | 83114 | - | - | DEBRIDEMENT |
| 665 | Pitchandi | 58 | M | 67231 | - | - | DEBRIDEMENT |
| 666 | Vanitha | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 667 | Veluthai | 50 | F | 70281 | + | + | DEBRIDEMENT |
| 668 | Sudith | 59 | M | 79021 | - | - | DEBRIDEMENT |
| 669 | Mudalaiyammal | 47 | F | 50217 | - | - | DEBRIDEMENT |
| 670 | Balan | 43 | M | 89202 | - | - | DEBRIDEMENT |
| 671 | Selvan | 49 | F | 85425 | + | - | DEBRIDEMENT |

| 672 | Arumugapandi | 62 | M | 85412 | - | - | DEBRIDEMENT |
|---|---|---|---|---|---|---|---|
| 673 | Sankaran | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 674 | Girinath | 53 | M | 84326 | - | + | DEBRIDEMENT |
| 675 | Jalathambal | 54 | F | 62912 | - | - | TOE AMPUTATION |
| 676 | Israel | 63 | M | 72928 | - | - | DEBRIDEMENT |
| 677 | Kavitha | 45 | F | 52902 | - | - | DEBRIDEMENT |
| 678 | Praveen | 59 | M | 82652 | + | - | DEBRIDEMENT |
| 679 | Rukmani devi | 47 | F | 72078 | - | - | DEBRIDEMENT |
| 680 | Rakkammal | 63 | F | 92546 | - | - | DEBRIDEMENT |
| 681 | Santhanam | 65 | M | 97523 | - | - | AK AMPUTATION |
| 682 | Thomas | 46 | M | 23455 | - | - | DEBRIDEMENT |
| 683 | Kumaran | 63 | M | 86422 | - | - | DEBRIDEMENT |
| 684 | Kalaiarasi | 54 | F | 86432 | - | - | DEBRIDEMENT |
| 685 | Masoodh basha | 64 | M | 86544 | + | - | TOE AMPUTATION |
| 686 | Subramani | 45 | M | 72763 | - | - | DEBRIDEMENT |
| 687 | Arun | 56 | M | 85422 | - | - | DEBRIDEMENT |
| 688 | Kumaravel | 74 | M | 78424 | + | + | DEBRIDEMENT |
| 689 | Meenakshi | 52 | F | 86456 | - | - | DEBRIDEMENT |
| 690 | Arumugam | 56 | M | 86534 | - | + | DEBRIDEMENT |
| 691 | Vinoth | 52 | M | 28272 | - | + | BK AMPUTATION |
| 692 | Velumayil | 49 | F | 70982 | - | - | DEBRIDEMENT |
| 693 | Veerasenan | 65 | M | 62982 | - | - | DEBRIDEMENT |
| 694 | Periakaruppan | 55 | M | 43441 | - | + | BK AMPUTATION |
| 695 | Sundaram | 59 | M | 43529 | - | - | DEBRIDEMENT |
| 696 | Mookammal | 54 | F | 43114 | + | - | DEBRIDEMENT |
| 697 | Irulandi | 62 | M | 45237 | - | - | DEBRIDEMENT |
| 698 | Mary | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 699 | Anandiammal | 64 | F | 65322 | + | - | DEBRIDEMENT |
| 700 | Sukumar | 55 | M | 86928 | - | - | DEBRIDEMENT |
| 701 | Hariharan | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 702 | Nafiz Mohammed | 39 | M | 62978 | - | - | DEBRIDEMENT |
| 703 | Andy | 49 | M | 67694 | - | - | DEBRIDEMENT |
| 704 | Lakshmi | 61 | F | 51213 | - | - | DEBRIDEMENT |
| 705 | Periakaruppan | 55 | M | 43441 | - | + | TOE AMPUTATION |
| 706 | Sundarammal | 59 | F | 43529 | - | - | DEBRIDEMENT |
| 707 | kannan | 67 | M | 86432 | + | - | DEBRIDEMENT |
| 708 | Amirtham | 53 | F | 27982 | - | - | DEBRIDEMENT |
| 709 | Vallithai | 43 | F | 78622 | - | - | DEBRIDEMENT |
| 710 | Prem rajan | 58 | M | 25872 | - | - | SKIN GRAFT |
| 711 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 712 | Murugayee | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 713 | Jesudhas | 51 | M | 43498 | - | -- | DEBRIDEMENT |
| 714 | Pari | 58 | M | 56235 | - | - | DEBRIDEMENT |
| 715 | Christopher | 62 | M | 61239 | + | + | DEBRIDEMENT |
| 716 | Esther | 61 | F | 60351 | - | + | DEBRIDEMENT |
| 717 | Sarkkarai thevar | 58 | M | 97562 | - | - | DEBRIDEMENT |
| 718 | kumaravel | 67 | M | 43672 | -- | -- | DEBRIDEMENT |
| 719 | Malar | 53 | F | 58953 | -- | - | DEBRIDEMENT |
| 720 | Subash Bose | 72 | M | 57213 | + | - | DEBRIDEMENT |
| 721 | Raja sambandam | 35 | M | 61231 | - | - | DEBRIDEMENT |
| 722 | Ranjini | 46 | F | 83114 | - | - | DEBRIDEMENT |
| 723 | Prem | 58 | M | 67231 | - | + | DEBRIDEMENT |
| 724 | Vanitha kumari | 52 | F | 27544 | + | - | DEBRIDEMENT |
| 725 | Manamalli | 67 | F | 70112 | + | - | AK AMPUTATION |
| 726 | Balakumaran | 47 | M | 79231 | - | - | DEBRIDEMENT |
| 727 | Ponmurugan | 65 | M | 29466 | - | - | TOE AMPUTATION |
| 728 | Selvakumar | 57 | M | 89272 | - | - | DEBRIDEMENT |
| 729 | Mallika | 48 | F | 78297 | - | - | DEBRIDEMENT |

| 730 | Kumaresan | 60 | M | 89251 | - | - | DEBRIDEMENT |
|---|---|---|---|---|---|---|---|
| 731 | kannan | 67 | M | 86432 | - | - | DEBRIDEMENT |
| 732 | Manivasagan | 57 | M | 84325 | - | - | DEBRIDEMENT |
| 733 | Rakkammal | 63 | F | 92546 | + | + | DEBRIDEMENT |
| 734 | Santhanakannan | 65 | M | 97523 | - | - | DEBRIDEMENT |
| 735 | Thiyagu | 73 | M | 92455 | + | - | DEBRIDEMENT |
| 736 | Rasukutty | 55 | M | 82248 | - | - | DEBRIDEMENT |
| 737 | Mani shankar | 57 | M | 84325 | - | + | DEBRIDEMENT |
| 738 | Jason | 56 | M | 26877 | - | - | DEBRIDEMENT |
| 739 | Veerappa moily | 56 | M | 27809 | -- | - | DEBRIDEMENT |
| 740 | Sudarmani | 45 | F | 28092 | - | - | DEBRIDEMENT |
| 741 | Thilagar | 45 | M | 27973 | + | - | DEBRIDEMENT |
| 742 | Chinthamani | 67 | F | 51978 | - | + | DEBRIDEMENT |
| 743 | Karuppi natchiar | 56 | F | 96542 | - | - | DEBRIDEMENT |
| 744 | Mookapillai | 62 | M | 70256 | - | - | DEBRIDEMENT |
| 745 | Lakshmi narayanan | 56 | M | 90267 | + | - | AK AMPUTATION |
| 746 | Sundaram | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 747 | Narayanan | 49 | M | 80972 | - | - | DEBRIDEMENT |
| 748 | Rakesh | 67 | M | 26987 | - | - | DEBRIDEMENT |
| 749 | Nayeem | 56 | F | 80974 | -- | + | DEBRIDEMENT |
| 750 | Akilandeshwari | 39 | F | 87562 | + | - | DEBRIDEMENT |
| 751 | Nagasundari | 67 | F | 80972 | - | - | DEBRIDEMENT |
| 752 | Mariraja | 54 | M | 86544 | + | - | TOE AMPUTATION |
| 753 | Subramani | 45 | M | 72763 | - | - | DEBRIDEMENT |
| 754 | Boominathan | 57 | M | 40257 | - | - | DEBRIDEMENT |
| 755 | Tahsin | 54 | F | 60272 | - | - | DEBRIDEMENT |
| 756 | Ganesan | 67 | M | 27809 | - | + | DEBRIDEMENT |
| 757 | Kamesh | 56 | M | 69826 | - | - | BK AMPUTATION |
| 758 | Saroja | 48 | F | 70922 | - | - | DEBRIDEMENT |
| 759 | Ayyappan | 76 | M | 99762 | + | - | DEBRIDEMENT |
| 760 | Aravind | 56 | M | 80974 | + | + | DEBRIDEMENT |
| 761 | Williams | 39 | M | 87562 | - | - | DEBRIDEMENT |
| 762 | Natesan | 67 | F | 80972 | + | + | TOE AMPUTATION |
| 763 | Mokkaisami | 60 | M | 90523 | - | - | DEBRIDEMENT |
| 764 | Krishnan | 59 | M | 60031 | + | + | DEBRIDEMENT |
| 765 | Anandalaxmi | 62 | F | 61352 | - | - | DEBRIDEMENT |
| 766 | Uma | 48 | F | 47213 | - | - | DEBRIDEMENT |
| 767 | Muruganandam | 59 | M | 53421 | + | - | DEBRIDEMENT |
| 768 | Deepal | 53 | F | 56432 | + | - | TOE AMPUTATION |
| 769 | Saraswathiammal | 38 | F | 78342 | - | - | DEBRIDEMENT |
| 770 | Priya | 55 | F | 43441 | - | + | BK AMPUTATION |
| 771 | Sundaram | 59 | M | 43529 | - | - | DEBRIDEMENT |
| 772 | Madasami | 54 | F | 43114 | - | - | DEBRIDEMENT |
| 773 | Irulandi | 62 | M | 45237 | - | - | DEBRIDEMENT |
| 774 | Merlin | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 775 | Laxmi | 46 | F | 96326 | - | - | SKIN GRAFT |
| 776 | Venu Mahalingam | 72 | M | 97642 | + | + | DEBRIDEMENT |
| 777 | Karuppi | 56 | F | 96542 | - | - | DEBRIDEMENT |
| 778 | Palpandi | 58 | M | 96532 | + | - | TRANSMETATARSAL AMPUTATION |
| 779 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 780 | Ravi shankar | 49 | M | 85425 | + | + | DEBRIDEMENT |
| 781 | Arumugam | 62 | M | 85412 | - | - | DEBRIDEMENT |
| 782 | Umayal | 64 | F | 96525 | - | - | DEBRIDEMENT |
| 783 | Gowri | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 784 | Ayyakannu | 63 | m | 76523 | - | - | DEBRIDEMENT |
| 785 | Dhanasekhar | 57 | M | 89272 | - | - | DEBRIDEMENT |
| 786 | Mallika | 48 | F | 78297 | - | - | DEBRIDEMENT |
| 787 | Kumaresan | 60 | M | 89251 | - | - | DEBRIDEMENT |

| 788 | Seethaiammal | 48 | F | 40271 | + | + | BK AMPUTATION |
|---|---|---|---|---|---|---|---|
| 789 | Andiyappan | 69 | M | 70182 | - | - | DEBRIDEMENT |
| 790 | Parasuram | 58 | M | 72492 | - | - | DEBRIDEMENT |
| 791 | Sadayandi | 64 | M | 87682 | - | - | DEBRIDEMENT |
| 792 | Felicia | 50 | F | 26986 | - | - | DEBRIDEMENT |
| 793 | Jennath Begum | 37 | F | 76572 | + | + | DEBRIDEMENT |
| 794 | Venu srinivasan | 72 | M | 97642 | - | - | DEBRIDEMENT |
| 795 | Maheswari | 43 | F | 72542 | + | + | TOE AMPUTATION |
| 796 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 797 | Perumal | 39 | M | 92182 | - | - | DEBRIDEMENT |
| 798 | Kuppammal | 71 | F | 52132 | + | - | DEBRIDEMENT |
| 799 | Andy | 49 | M | 67694 | - | + | DEBRIDEMENT |
| 800 | Lakshmi | 61 | F | 51213 | + | - | DEBRIDEMENT |
| 801 | Periakka | 55 | F | 43441 | - | + | BK AMPUTATION |
| 802 | Sigappi | 59 | M | 43529 | - | - | DEBRIDEMENT |
| 803 | Paraman | 54 | M | 43114 | - | - | DEBRIDEMENT |
| 804 | Irulandi | 62 | M | 45237 | - | - | DEBRIDEMENT |
| 805 | Yamuna | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 806 | Anandiammal | 64 | F | 65322 | - | - | DEBRIDEMENT |
| 807 | Solomon | 55 | M | 86928 | - | - | DEBRIDEMENT |
| 808 | Rasu | 67 | M | 67497 | - | + | DEBRIDEMENT |
| 809 | Balamurugan | 43 | M | 76783 | - | - | DEBRIDEMENT |
| 810 | Parvathi | 55 | F | 58209 | - | - | DEBRIDEMENT |
| 811 | Bala | 58 | M | 70958 | - | - | DEBRIDEMENT |
| 812 | Meenakumari | 52 | F | 86543 | - | - | DEBRIDEMENT |
| 813 | Pandiyammal | 26 | F | 58261 | + | + | DEBRIDEMENT |
| 814 | Manickam | 56 | M | 29851 | - | - | DEBRIDEMENT |
| 815 | Pitchandi | 58 | M | 67231 | - | - | SKIN GRAFT |
| 816 | Vanitha | 52 | F | 27544 | - | - | DEBRIDEMENT |
| 817 | Vasuki | 50 | F | 70281 | + | - | DEBRIDEMENT |
| 818 | Servai | 59 | M | 79021 | - | - | DEBRIDEMENT |
| 819 | Mudalaiyammal | 47 | F | 50217 | - | - | DEBRIDEMENT |
| 820 | Chokkan | 65 | M | 29818 | + | + | TOE AMPUTATION |
| 821 | Velunatchi | 56 | F | 62987 | + | - | AK AMPUTATION |
| 822 | Sonai | 58 | M | 97562 | - | - | DEBRIDEMENT |
| 823 | Veerayee | 48 | F | 69862 | - | - | DEBRIDEMENT |
| 824 | Malar | 62 | F | 95421 | + | - | BK AMPUTATION |
| 825 | Poomayil | 45 | F | 66232 | - | - | DEBRIDEMENT |
| 826 | Upili thevar | 56 | M | 72981 | - | - | DEBRIDEMENT |
| 827 | Banu | 42 | F | 72982 | - | - | DEBRIDEMENT |
| 828 | Rajendran | 67 | M | 26981 | + | - | DEBRIDEMENT |
| 829 | Janet | 52 | F | 27091 | - | + | TOE AMPUTATION |
| 830 | Veerappan | 56 | M | 27809 | -- | - | DEBRIDEMENT |
| 831 | Sudha | 45 | F | 28092 | - | - | DEBRIDEMENT |
| 832 | Thalamuthu | 45 | M | 27973 | -- | - | DEBRIDEMENT |
| 833 | Chinnathai | 67 | F | 51978 | - | - | DEBRIDEMENT |
| 834 | Valli | 60 | F | 68345 | + | + | DEBRIDEMENT |
| 835 | Kannan | 45 | M | 87562 | - | - | DEBRIDEMENT |
| 836 | Ambika | 55 | F | 78452 | - | - | DEBRIDEMENT |
| 837 | Rajadurai | 67 | M | 67497 | - | - | DEBRIDEMENT |
| 838 | Brinda | 43 | F | 76783 | - | - | DEBRIDEMENT |
| 839 | rajathi | 55 | F | 58209 | - | - | DEBRIDEMENT |
| 840 | Balaji | 58 | M | 70958 | - | - | DEBRIDEMENT |
| 881 | Sadayandi | 64 | M | 87682 | - | - | DEBRIDEMENT |
| 842 | Seeniyammal | 50 | F | 26986 | + | + | BK AMPUTATION |
| 843 | Hazira Beevi | 37 | F | 76572 | + | - | DEBRIDEMENT |
| 844 | Rajkumar | 56 | M | 74422 | - | - | DEBRIDEMENT |
| 845 | Rajula | 45 | F | 76442 | - | - | DEBRIDEMENT |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 846 | Sarada | 48 | F | 70922 | - | - | DEBRIDEMENT |
| 847 | Ayyavu | 76 | M | 99762 | + | - | DEBRIDEMENT |
| 848 | Tamilarasan | 67 | M | 88521 | - | - | DEBRIDEMENT |
| 849 | Narayanamurthy | 49 | M | 80972 | - | + | DEBRIDEMENT |
| 850 | Saravanan | 58 | M | 55132 | + | - | DEBRIDEMENT |
| 851 | Rajesh | 35 | M | 56524 | - | - | DEBRIDEMENT |
| 852 | Fathima nasreen | 74 | F | 62515 | + | + | AK AMPUTATION |
| 853 | Mohamad Akbar | 39 | M | 58315 | - | - | DEBRIDEMENT |
| 854 | Rakku | 65 | F | 58423 | + | - | DEBRIDEMENT |
| 855 | Khader Ahmed | 70 | M | 50135 | -- | - | TOE AMPUTATION |
| 856 | Padmini | 34 | F | 53551 | - | - | DEBRIDEMENT |
| 857 | Raja | 45 | M | 57135 | + | - | DEBRIDEMENT |
| 858 | Kulandai | 55 | F | 58135 | - | + | DEBRIDEMENT |
| 859 | Krithika | 59 | F | 60031 | - | - | DEBRIDEMENT |
| 860 | Anand | 62 | F | 61352 | - | - | DEBRIDEMENT |
| 861 | Panneerselvam | 52 | M | 58832 | - | - | DEBRIDEMENT |
| 862 | Parameswari | 58 | F | 56235 | - | + | DEBRIDEMENT |
| 863 | Gopal | 62 | M | 61239 | + | + | TOE AMPUTATION |
| 864 | Shantha | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 865 | Yasin banu | 56 | F | 87652 | - | - | DEBRIDEMENT |
| 866 | Boopathy | 54 | M | 65542 | - | - | SKIN GRAFT |
| 867 | Anandi | 45 | F | 65322 | - | - | BK AMPUTATION |
| 868 | Sangumani | 55 | M | 86928 | - | - | DEBRIDEMENT |
| 869 | Muthammal | 52 | F | 86543 | + | - | DEBRIDEMENT |
| 870 | Sreekumaran | 67 | M | 86432 | - | - | DEBRIDEMENT |
| 871 | Manivasagan | 57 | M | 84325 | - | + | DEBRIDEMENT |
| 872 | Laxmi | 46 | F | 96326 | - | - | DEBRIDEMENT |
| 873 | Venuprabakar | 72 | M | 97642 | - | - | DEBRIDEMENT |
| 874 | Karuppi | 56 | F | 96542 | - | - | DEBRIDEMENT |
| 875 | Palpandi | 58 | M | 96532 | + | - | TRANSMETATARSAL AMPUTATION |
| 876 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 877 | Indra | 49 | F | 85425 | + | - | DEBRIDEMENT |
| 878 | Selvaragavan | 57 | M | 89272 | - | - | DEBRIDEMENT |
| 879 | Manimegalai | 48 | F | 78297 | - | - | DEBRIDEMENT |
| 880 | Kumar | 60 | M | 89251 | - | + | DEBRIDEMENT |
| 881 | Suriyakumar | 67 | M | 86432 | - | - | DEBRIDEMENT |
| 882 | Manivasagan | 57 | M | 84325 | - | - | DEBRIDEMENT |
| 883 | Rakkammal | 63 | F | 92546 | - | - | SKIN GRAFT |
| 884 | Sonai | 65 | M | 97523 | - | - | DEBRIDEMENT |
| 885 | Thirumal | 73 | M | 92455 | + | - | DEBRIDEMENT |
| 886 | Ramesh | 55 | M | 82248 | - | - | DEBRIDEMENT |
| 887 | Manikandan | 57 | M | 84325 | + | + | AK AMPUTATION |
| 888 | Palani | 74 | M | 78424 | - | - | DEBRIDEMENT |
| 889 | Meena | 52 | F | 86456 | - | - | DEBRIDEMENT |
| 890 | Velu | 56 | M | 86534 | - | - | DEBRIDEMENT |
| 891 | Rajesh | 65 | M | 97652 | - | + | DEBRIDEMENT |
| 892 | Mangayarkarasii | 53 | F | 82656 | - | - | DEBRIDEMENT |
| 893 | Marirajan | 54 | M | 86544 | + | - | TOE AMPUTATION |
| 894 | Ramachandran | 45 | M | 72763 | - | + | DEBRIDEMENT |
| 895 | Sundaram | 59 | M | 43529 | - | - | DEBRIDEMENT |
| 896 | Maruthayee | 54 | F | 43114 | - | - | DEBRIDEMENT |
| 897 | Irulappan | 62 | M | 45237 | - | - | DEBRIDEMENT |
| 898 | Mary | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 899 | Ulaganayagi | 64 | F | 65322 | - | - | DEBRIDEMENT |
| 900 | Sudharshan | 55 | M | 86928 | - | - | DEBRIDEMENT |
| 901 | Hariharan | 52 | F | 86543 | + | + | DEBRIDEMENT |
| 902 | Akbar | 39 | M | 62978 | - | - | DEBRIDEMENT |
| 903 | Nagavalli | 67 | F | 80972 | + | + | TRANS METATARSAL AMPUTATION |

| 904 | Mohanram | 60 | M | 90523 | - | - | DEBRIDEMENT |
|---|---|---|---|---|---|---|---|
| 905 | Punitha | 62 | F | 80256 | + | - | BK AMPUTATION |
| 906 | Vallithai | 43 | F | 78622 | - | - | DEBRIDEMENT |
| 907 | Suresh krishna | 58 | M | 25872 | - | - | DEBRIDEMENT |
| 908 | Venkatachalapathy | 52 | M | 28272 | - | + | BK AMPUTATION |
| 909 | Velumayil | 49 | F | 70982 | - | - | DEBRIDEMENT |
| 910 | Vijayan | 65 | M | 62982 | - | - | DEBRIDEMENT |
| 911 | Yasin | 45 | F | 27908 | - | - | DEBRIDEMENT |
| 912 | Rathi | 67 | F | 27091 | + | - | TRANSMETATARSAL AMPUTATION |
| 913 | Pandiyammal | 26 | F | 58261 | - | - | DEBRIDEMENT |
| 914 | Manickam | 56 | M | 29851 | - | - | DEBRIDEMENT |
| 915 | Petchi | 58 | F | 67231 | - | - | DEBRIDEMENT |
| 916 | Vanitha | 52 | F | 27544 | - | + | DEBRIDEMENT |
| 917 | Varshini | 50 | F | 70281 | + | - | DEBRIDEMENT |
| 918 | Sudalai | 59 | M | 79021 | + | - | DEBRIDEMENT |
| 919 | Meenakshi | 47 | F | 50217 | - | - | DEBRIDEMENT |
| 920 | Chandrasekar | 65 | M | 29818 | + | + | TOE AMPUTATION |
| 921 | Veerayee | 56 | F | 62987 | + | - | AK AMPUTATION |
| 922 | Sarkkarai | 58 | M | 97562 | - | - | DEBRIDEMENT |
| 923 | Vembuli | 48 | M | 69862 | - | - | DEBRIDEMENT |
| 924 | Alagu | 62 | M | 95421 | + | - | BK AMPUTATION |
| 925 | Poomayil | 45 | F | 66232 | - | - | DEBRIDEMENT |
| 926 | Gandhimathi | 56 | F | 96542 | + | - | DEBRIDEMENT |
| 927 | Perumal | 58 | M | 96532 | + | - | TRANSMETATARSAL AMPUTATION |
| 928 | Udayarani | 58 | F | 96422 | - | - | DEBRIDEMENT |
| 929 | Thangaraj | 49 | F | 85425 | - | + | DEBRIDEMENT |
| 930 | Alagammal | 62 | F | 85412 | - | - | DEBRIDEMENT |
| 931 | Alagu | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 932 | Ghulzar | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 933 | Poongothai | 63 | m | 76523 | - | - | DEBRIDEMENT |
| 934 | Roopa | 63 | F | 92546 | - | - | DEBRIDEMENT |
| 935 | Santhanam | 65 | M | 97523 | - | + | DEBRIDEMENT |
| 936 | Thayumanavan | 73 | M | 92455 | - | - | DEBRIDEMENT |
| 937 | Chellapandi | 65 | M | 82548 | - | - | DEBRIDEMENT |
| 938 | Mookammal | 43 | F | 72542 | + | + | BK AMPUTATION |
| 939 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 940 | Amala | 49 | F | 85425 | - | - | DEBRIDEMENT |
| 941 | Arumugam | 62 | M | 85412 | - | + | DEBRIDEMENT |
| 942 | Prasad | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 943 | Shankar | 53 | F | 84326 | - | - | DEBRIDEMENT |
| 944 | James | 63 | m | 76523 | - | - | DEBRIDEMENT |
| 945 | Muniyandi | 48 | F | 67543 | - | - | DEBRIDEMENT |
| 946 | Jesudhas | 51 | M | 43498 | - | -- | DEBRIDEMENT |
| 947 | Parameswari | 58 | F | 56235 | - | - | DEBRIDEMENT |
| 948 | Ganesh | 62 | F | 61239 | + | + | TOE AMPUTATION |
| 949 | Sasi | 61 | F | 60351 | - | - | DEBRIDEMENT |
| 950 | Karthi | 58 | M | 97552 | - | - | DEBRIDEMENT |
| 951 | Rajeshwari | 45 | F | 76442 | - | + | DEBRIDEMENT |
| 952 | Suresh | 60 | M | 37541 | - | - | DEBRIDEMENT |
| 953 | Lenin | 45 | M | 82092 | - | - | DEBRIDEMENT |
| 954 | Singari | 37 | F | 91671 | - | - | DEBRIDEMENT |
| 955 | Kumaresan | 60 | M | 89251 | - | - | DEBRIDEMENT |
| 956 | Seethai ammal | 48 | F | 40271 | + | - | AK AMPUTATION |
| 957 | Andithevar | 69 | M | 70182 | - | - | DEBRIDEMENT |
| 958 | kannan | 67 | M | 86432 | - | - | DEBRIDEMENT |
| 959 | Amirtham | 53 | F | 27982 | - | - | DEBRIDEMENT |
| 960 | Vallithai | 43 | F | 78622 | - | - | DEBRIDEMENT |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 961 | Padmini | 34 | F | 53551 | + | - | DEBRIDEMENT |
| 962 | Rajan | 45 | M | 57135 | - | - | DEBRIDEMENT |
| 963 | Subbulaxmi | 55 | F | 58135 | - | - | DEBRIDEMENT |
| 964 | Karthik | 59 | M | 60031 | + | + | AK AMPUTATION |
| 965 | Anandalaxmi | 62 | F | 61352 | - | - | DEBRIDEMENT |
| 966 | Kumaran | 48 | M | 47213 | - | - | DEBRIDEMENT |
| 967 | Muruganandam | 59 | M | 53421 | - | - | DEBRIDEMENT |
| 968 | Kulandaiammal | 53 | F | 56432 | + | - | TOE AMPUTATION |
| 969 | Sarasu | 38 | F | 78342 | - | - | DEBRIDEMENT |
| 970 | Udayakumar | 58 | M | 96422 | - | - | DEBRIDEMENT |
| 971 | Savithri | 49 | F | 85425 | + | - | DEBRIDEMENT |
| 972 | Arumugapandi | 62 | M | 85412 | - | + | DEBRIDEMENT |
| 973 | Alagumani | 64 | M | 96525 | - | - | DEBRIDEMENT |
| 974 | Gayathri | 53 | F | 84326 | - | + | DEBRIDEMENT |
| 975 | Venkatachalapathy | 52 | M | 28272 | - | + | BK AMPUTATION |
| 976 | Velumayil | 49 | F | 70982 | - | - | DEBRIDEMENT |
| 977 | Varun | 65 | M | 62982 | - | - | DEBRIDEMENT |
| 978 | Selvakumar | 57 | M | 89272 | - | - | DEBRIDEMENT |
| 979 | Maneka | 48 | F | 78297 | - | - | DEBRIDEMENT |
| 980 | Madasamy | 60 | M | 89251 | - | - | DEBRIDEMENT |
| 981 | Subbu | 67 | M | 86432 | - | - | DEBRIDEMENT |
| 982 | Manivasagan | 57 | M | 84325 | - | - | SKIN GRAFT |
| 983 | Radhakrishnan | 63 | M | 92546 | + | - | DEBRIDEMENT |
| 984 | Dhanam | 65 | M | 97523 | - | - | DEBRIDEMENT |
| 985 | Thirumurugan | 73 | M | 92455 | + | - | DEBRIDEMENT |
| 986 | Rasu | 55 | M | 82248 | - | - | DEBRIDEMENT |
| 987 | Mani | 57 | M | 84325 | - | + | DEBRIDEMENT |
| 988 | Janarthan | 56 | M | 26877 | - | - | DEBRIDEMENT |
| 989 | Laxmi | 46 | F | 96326 | - | - | DEBRIDEMENT |
| 990 | Velu | 56 | M | 97642 | + | - | AK AMPUTATION |
| 991 | Kumaran | 63 | M | 86422 | - | - | DEBRIDEMENT |
| 992 | Durga | 54 | F | 86432 | + | + | DEBRIDEMENT |
| 993 | Masanam | 54 | M | 86544 | + | - | TOE AMPUTATION |
| 994 | Pallikoodathan | 45 | M | 72763 | - | + | DEBRIDEMENT |
| 995 | Boominathan | 57 | M | 40257 | + | - | DEBRIDEMENT |
| 996 | Servai | 54 | M | 60272 | - | - | DEBRIDEMENT |
| 997 | Ganesan | 67 | M | 27809 | - | + | DEBRIDEMENT |
| 998 | Karpagam | 56 | F | 69826 | - | - | BK AMPUTATION |
| 999 | Sarada | 48 | F | 70922 | - | - | DEBRIDEMENT |
| 1000 | Ayngaran | 76 | M | 99762 | + | - | DEBRIDEMENT |